

Community Health Advisors: Programs in the United States Health Promotion and Disease Prevention

Volume II

September 1994



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion
Division of Chronic Disease Control and Community Intervention
Atlanta, GA 30333

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Program Data Sheet

About Community Health Advisors

"If increased community competence is an outcome that is just as important as health improvements, then planners and practitioners need to build upon the naturally existing care and organizing skills of community health advisors who are uniquely linked to people and places and in ways that no health professional could begin to acquire."

Eugenia Eng, DrPH
Associate Professor
Department of Health Behavior and Health Education
School of Public Health
University of North Carolina

"Lay health workers, who so effectively bridge gaps between the haves and have nots of our society, play a significant role in creating a democracy of knowledge and a democracy of health."

Joel Meister
Director of Prevention Research
Primary Care
Mariposa Community Health Center
Nogales, Arizona

"Community health advisors bring a special expertise to their work. They understand the threads that form the cloth that is their community. When health and human service workers seek to serve communities, they may join with community health advisors to discover the weak points in the fabric of the community. They may then work hand-in-hand to weave the broken threads back to whole cloth. As a team, their efforts will be wisely and effectively carried out."

E. Lee Rosenthal, MPH
Director
State Office of Rural Health Program
Arizona Rural Health Office
University of Arizona



Preface

he mission of the Centers for Disease Control and Prevention (CDC) is to promote health and quality of life by preventing and controlling disease, injury, and disability. As the nation's prevention agency, CDC accomplishes its mission by working with partners throughout the nation and the world to monitor health, detect and investigate health problems, conduct research to enhance prevention, develop and advocate sound public health policies, implement prevention strategies, promote healthy behaviors, foster safe and healthful environments, and provide leadership and training.

In the United States, community health advisors* foster these goals by conducting community-level activities and interventions that promote health and prevent diseases. These advisors are trusted, respected members of the community who serve as a bridge between their peers and health professionals. Their informal, but direct, involvement enhances the delivery of health-related services to diverse populations, including minority, rural, and underserved populations. They provide a vital service by establishing and maintaining relationships with health care professionals in local public health departments and laypersons in the community. As health advocates, community health advisors promote and encourage positive, healthful behaviors among their peers.

In recent years, community health advisors have experienced a resurgence in their role in the community. They are currently involved in a variety of CDC-funded projects in such areas as HIV/AIDS, breast and cervical cancer, cardiovascular disease, diabetes, maternal and child health, and nutrition.

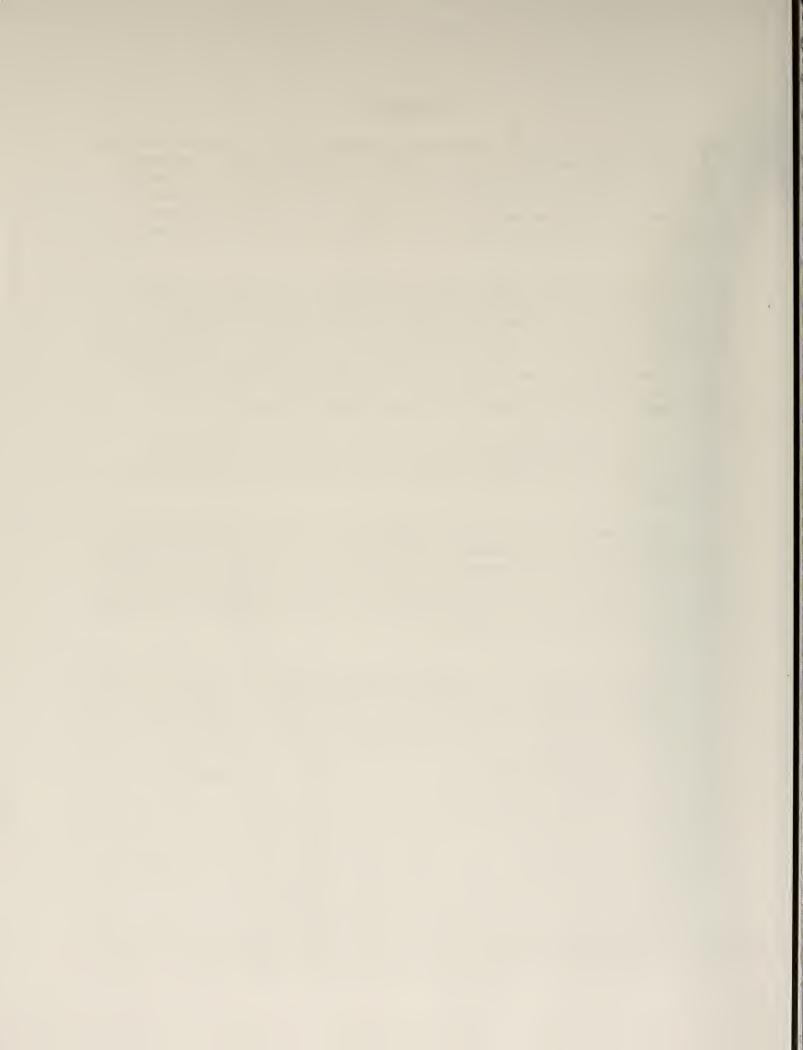
To emphasize the important work being done by indigenous health workers at the community and neighborhood levels, we have prepared an extensive bibliography by searching bibliographic databases and by contacting organizations, programs, and individuals engaged in community-based activities and interventions. During our search, we may have overlooked some excellent source materials. If you find that your program or article is not listed, we invite you to furnish information about your project by filling out the program data sheet located after the evaluation page. We will include your program or research when we update the bibliography.

*The term community health advisor denotes trusted and respected community members who provide informal community-based health-related services and who establish vital links between health care professionals in local public health departments and persons in the community. In the following list, we have tried to include some of the different terms that may be used to identify these lay-health community members:

Community health advisor
Community health advocate
Community health aide
Community health representative
Community health worker
Community helper
Family health promoter
Health facilitator
Health promoter
Health visitor
Health liaison
Home visitor
Indigenous health aide

Indigenous paraprofessional

Informal helper
Lay community health worker
Lay health worker
Lay volunteer
Natural caregiver
Natural helper
Paraprofessional
Parent befriender
Peer counselor
Peer health advisor
Peer health educator
Promotora
Resource mother
Volunteer health educator



Introduction

What does this publication contain?

Community Health Advisors: Programs in the United States, Health Promotion and Disease Prevention, Volume 2 contains bibliographic abstracts of program descriptions from the 1960s through the present. These entries were selected to provide information to community health advisors on health promotion and disease prevention programs covering such subjects as breast and cervical cancer, heart disease, hypertension, nutrition, physical activity, pregnancy and prenatal care, and smoking prevention. Items were obtained by searching computerized bibliographic databases and by contacting organizations currently conducting programs involving the use of community health advisors. Items are also listed in the Health Promotion and Education Database, the Comprehensive School Health Database, and the Cancer Prevention and Control Database, subfiles of the Combined Health Information Database (CHID).

What is CHID?

CHID is a computerized bibliographic database of health information and health promotion resources developed and managed by several federal agencies. This unique reference is for all health professionals who need to locate health information for themselves or their clients. Current CHID producers include the Centers for Disease Control and Prevention, the National Institutes of Health, the Office of Disease Prevention and Health Promotion, the Department of Veterans Affairs, and the Health Resources and Services Administration.

How can I access the databases?

CHID and its subfiles, the Health Promotion and Education Database, the Comprehensive School Health Database, and the Cancer Prevention and Control Database are available for online searching through CDP Online, CDP Technologies, 333 Seventh Avenue, New York, NY 10001, (800) 289-4277 and may be accessed using a telecommunicating computer or through libraries and information centers that subscribe to CDP Online. The databases are also available through CDP File, a CD-ROM produced by CDC's National Center for Chronic Disease Prevention and Health Promotion.

Where can I get more information?

Should you need more information on the databases, CDP File, or CHID; wish to submit materials for possible inclusion in the databases; or need additional copies of this publication, contact:

Technical Information Services Branch
National Center for Chronic Disease Prevention
and Health Promotion
Centers for Disease Control and Prevention
4770 Buford Hwy, NE, Mailstop K-13
Atlanta, GA 30341-3724
(404) 488-5080

Questions on programmatic issues may be directed to:

Division of Chronic Disease Control and Community Intervention National Center for Chronic Disease Prevention and Health Promotion Centers for Disease Control and Prevention 4770 Buford Hwy, NE, Mailstop K-56 Atlanta, GA 30341-3724 (404) 488-5440

How to Use This Publication

Arrangement of Items

Items in this publication are arranged in 17 sections: (1) Adolescents and Teens. (2) Arthritis. (3) Asthma, (4) Cancer, (5) College, (6) Diabetes, (7) Family, (8) Health Promotion/Disease Prevention, (9) Injury/Violence, (10) Maternal and Child Health, (11) Migrant Workers, (12) Nutrition, (13) Quality of Life, (14) Sexual Behavior, (15) Substance Abuse, (16) Tobacco Control, and (17) Training Programs. Items in each part are listed in alphabetical order by title. The items are numbered sequentially.

Indexes

This publication contains three indexes. The Title Index lists program titles. The Program Coordinator Index lists program directors and program contacts. The Subject Index lists selected key words describing the content of programs and publications. If you know the title of a publication, use the Title Index. If you are looking for a program conducted by a particular person, use the Program Coordinator Index. If you want to identify items in a specific subject area, such as diabetes control programs, use the Subject Index.

Data Elements

A citation and abstract are listed for each item in this publication. Among the data elements included are program name, program contact, agency, program dates, health topics addressed, target population, and CHID accession number.

Sample Description:

Program: Contact:

Parent Befriender Pat Argyros

Director, Volunteer Care Ministries

Agency:

St. Paul Area Council of Churches

1671 Summit Avenue St. Paul, MN 55105 Telephone: (612) 646-8805

Program Dates:

1987-continuing.

Program Delivery:

Local health department, religious institution

Funding Source(s):

St. Paul Area Council of Churches

Primary Purpose:

Prevention of child abuse/neglect by providing social support in lives of extremely stressed families.

Services Offered:

In-home visiting, social support, role modeling, linkage to community resources

Methods Employed:

Team approach with public health nurses as case managers

Materials Used:

Developed curriculum (unavailable), purchased video ("Friends" from California P.H.), developed

brochure (photocopy available)

Health Topics

Injuries, nutrition, pregnancy/prenatal care, sexual behavior (adolescent), violence

Addressed:

Geographic Area/Unit:

Urban, county

Program Setting:

Homes

Target Population:

Asian American, African American, white, female, male, infants, adolescents, adults

CHA Title:

Parent befriender

CHA Roles:

Outreach, patient/client advocate, social support or counseling, transportation provider

CHA Information: Parent befrienders receive 15 hours of initial training and 2 hours of inservice training each month.

Training is conducted by the program director, experienced befrienders, and licensed psychologists. Each parent befriender works an average of 8 hours a month, receiving reimbursement for such

expenses as mileage. The program does not issue credits or certificates.

Number of CHAs: 25 Number of Clients Served 40

in 12 Months:

Evaluation Plan: Yes Methods Used in N/A

Recruiting CHAs:

Methods Used in Ongoing support/supervision groups, recognition, personal availability

Retaining CHAs:

Methods for Recruiting Referred by Ramsey County Public Health Department

Clients:

Methods for Retaining

N/A

Clients:

CHID Accession Number: (XXnnnnnnn)

Obtaining Additional Information

This publication provides source and availability information for each item when noted. For more information about a program or publication, contact the agencies or persons listed.

Community Health Advisors: Programs in the United States Health Promotion and Disease Prevention Program Descriptions

Adolescents and Teens

001

Program • Cincinnati PSI: Postponing Sexual Involvement Educational Services.

Contact • Kraus, Christopher.

Agency • Postponing Sexual Involvement (PSI), c/o Hughes Center, 2515 Clifton Avenue, Cincinnati, OH 45219. (513) 559-3014.

Program Dates • March 1990-continuing.

Program Delivery • Schools, community, hospitals/medical clinics, and religious organizations.

Funding Source(s) • Adolescent Pregnancy Resource Network, BARDES Fund/ILSCO, Children's Hospital Medical Center, and various other sources.

Primary Purpose • To help teenagers learn to cope with and resist social and peer pressures to become sexually active at inappropriate and early ages.

Materials Used • PSI curriculum created at Grady Memorial Hospital, videotapes, and training guides.

Health Topic(s) Addressed • Family planning, HIV/AIDS, pregnancy and prenatal care, and adolescent sexual behavior.

Geographic Area/Unit • County, urban, with out-of-state consultation available.

Program Setting • Hospitals, medical clinics, and schools.

Target Population • African-American and white youths aged 6 through 19 years.

CHA Title • PSI team leaders.

CHA Roles • Health education and community advocacy services.

• Team leaders average 15 hours of work each month and receive a stipend of approximately \$300, as well as other compensation. Team leaders receive 23 hours of initial training followed by 2 hours of inservice training per month.

Number of CHAs • 80.

Number of Clients Served • 4,000. in 12 Months

Evaluation Plan • Yes. Through parent surveys, tracking live births and abortions by year, and telephone interviews with students.

Methods Used in • Recruiting CHAs

• Word of mouth, recruitment assemblies, formal application, interview, and selection process.

Methods Used in • Retaining CHAs

• Group-building opportunities, screening report card grades before selection during the year, and having clear standards of job performance.

CHID Accession Number • SA94P1565

Program • Na Opio Kokua O Waianae.

Contact • Chinen, Ron; Chang, Sandi; Weidman, Dolores.

Agency • Waianae Quick Kokua T.C., 85-251 Farrington Highway, Waianae, HI 96792. (808) 696-4291.

Program Dates • November 1981-continuing.

Program Delivery • Schools, homes, and community.

Funding Source(s) • Hawaii Department of Education, Hawaii Department of Labor.

Primary Purpose • To assist all students on campus needing help so they can become productive citizens.

Services Offered • Training services for student volunteers.

Methods Employed • Summer and winter training retreats, an annual parent night, video facilitation, and an American Red Cross program.

Materials Used • Training guides (Natural Helpers, Youth Helping Youth), a teaching aid (Lokahi Wheel), and videos (Teen Problems, Power of Choice).

Health Topic(s) Addressed • Family planning, HIV/AIDS, pregnancy and prenatal care, sexual behavior, and substance abuse.

Geographic Area/Unit • Rural.

Program Setting • Schools.

Target Population • Asian American, Pacific Islander, Puerto Rican, African-American, and white adolescents.

CHA Title • Counselors.

CHA Roles • Outreach, health education, client advocacy, social support, and community advocacy.

CHA Information • Peer counselors work an average of 4 hours per month and are not compensated for their services. They receive 16 hours of initial training and 4 hours of inservice training per month.

- Number of CHAs 30.
- Number of Clients Served 336. in 12 Months
 - Evaluation Plan Yes.
 - Methods Used in Word of mouth, school bulletin, and direct contact with qualified students.

 Recruiting CHAs
 - Methods Used in Activity training, positive relationships with peer counselors, and scheduling field trips to assist other students with self esteem.
 - Methods for Recruiting Requests from teachers, counselor referrals, and self referrals.

 Clients
 - Methods for Retaining Support, self-esteem, and consistency.

 Clients
- CHID Accession Number SA94P1567

Program • Natural Helpers Project.

Contact • Hedrick, Margaret.

Agency • Pendleton Community Care, P.O. Box 100, Franklin, WV 26807. (304) 358-7230.

Program Dates • October 1989-continuing.

Program Delivery • Schools.

Funding Source(s) • Project HOPE.

Primary Purpose • To promote healthy lifestyles among adolescents.

Services Offered • Referrals, peer counseling, and advocates.

Health Topic(s) Addressed • HIV/AIDS, injuries, nutrition, pregnancy/prenatal care, physical activity, adolescent sexual behavior, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural.

Program Setting • Community-based agency and hospital or medical clinic.

Target Population • White male and female adolescents between the ages of 13 and 19.

CHA Title • Natural helpers.

CHA Roles • Risk assessment, health promotion, and health education.

CHA Information • Natural helpers receive 1 weekend of training every year by nurse practitioners, pediatricians, and trainers.

Number of CHAs • 25.

Methods Used in • Peer referrals and adolescent surveys.

Recruiting CHAs

Methods Used in • Regular followup by the coordinator and regular training/continuing education activities.

Methods for Recruiting • Students are the clients at the schools.

Clients

CHID Accession Number • SA94P1574

Program • Project 4 Teens: Peer Helpers.

Contact • Austin-Roehler, Christian.

Agency • Wright County Human Services Agency, Government Center, 10 Northwest 2nd Street, Buffalo, NY 55315. (612) 682-7464.

Program Dates • 1991-continuing.

Program Delivery • Schools.

Funding Source(s) • Local government agency, State, and schools.

Primary Purpose • Trains teens to teach 12 to 14 year olds about sexual health issues and to help them develop skills they need to make wise personal decisions.

Materials Used • Project 4 Teens curriculum.

Health Topic(s) Addressed • Family planning, HIV/AIDS, and adolescent sexual behavior.

Geographic Area/Unit • Rural, county areas.

Program Setting • Community-based agency, local health department, and schools.

Target Population • Adolescents.

CHA Title • Peer Workers, Peer Helpers, or Project 4 Teens Trainers.

CHA Roles • Health promotion and health education services.

CHA Information • Peer workers average 3 hours worked per month. They receive no salary. They receive 16 hours of initial training and no inservice training. The program does not issue credits or certificates.

Number of CHAs • 25.

Number of Clients Served • 400. in 12 Months

Evaluation Plan • Yes.

Methods Used in • School social workers or counselors, and through word of mouth.

Recruiting CHAs

Methods Used in ● Keeping them involved with the program.

Retaining CHAs

Methods for Recruiting • Clients are school districts.

Clients

Methods for Retaining • Clients are retained through the good work of the peer helpers.

Clients

CHID Accession Number • SA94P1569

Program • TAMS (Teen Age Medical Service) Talk.

Contact • Brace-Adkins, Susan.

Agency • Teen Age Medical Service, 2425 Chicago Avenue, S., Minneapolis, MN 55404. (612) 863-6844.

Program Dates • 1991-continuing.

Program Delivery • Schools, worksites, religious organizations, community, public health clinics, hospitals/medical clinics, and community agencies.

Funding Source(s) • McDonalds Foundation.

Primary Purpose • To deliver health messages to teenagers, adults, youth workers, and professionals.

Methods Employed • Roleplaying and interactive dialogue.

Health Topic(s) Addressed • Family planning, HIV/AIDS, relationships/dating, sexual behavior (adolescent) and abstinence, sexually transmitted disease, substance abuse, and violence.

Geographic Area/Unit • County, state, and urban.

Program Setting • Community-based agency and hospital or medical clinic.

Target Population • Children, adolescents, and health professionals working with youth.

CHA Title • Peer educators.

CHA Roles • Health promotion or health education, social support or counseling, and community advocate.

CHA Information • Peer educators receive 6 hours of initial training, 2 hours of inservice training each month, and \$5 per hour. The training is conducted by health educators, the program coordinator, and other peer educators.

Number of CHAs • 10.

Number of Clients Served • 47,000. in 12 Months

Evaluation Plan • Yes. A 5-item questionnaire administered to program participants.

Methods Used in • Referral from peer educators, referrals from teachers/staff, and stipends. Recruiting CHAs

Methods Used in • Stipends, having fun and doing some good at the same time, and keeping in constant and consistent contact with these workers.

Methods for Recruiting • Word of mouth, low cost, and promotion of program.

Clients

Methods for Retaining

Clients who have used the program in the past call again, program is inexpensive, and letters are sent out each year to health fairs and conferences.

CHID Accession Number • SA94P1576

Program • Teen Intervention Program.

Contact • Tsutsumi-Ota, Donna.

Agency • Teen Intervention Program, 1319 Punahou Street, Room 839, Honolulu, HI 96826. (808) 973-8501.

Program Dates • 1978-continuing.

Program Delivery • Schools, homes, public health clinics, worksites, the community, hospitals/medical clinics, and the Teen Intervention Program office.

Funding Source(s) • Hawaii Department of Health, Kapiolani Medical Center.

Primary Purpose • To reduce teen pregnancy and repeat pregnancy rates by providing information and referral services on sexuality, contraceptives, and parenting.

Services Offered • Individual and peer counseling, discussion or rap groups, abortion referral, parent-child communication, research, community education, lobbying, policy development, staff training and technical assistance, AIDS education, life planning program, decision making program, career options program, vocational skills program, and outreach efforts.

Methods Employed • Assisting the teen in examining the alternatives that are available and providing emotional and practical support throughout the teen's program involvement.

Materials Used • Resource directory.

Health Topic(s) Addressed • Sexual behavior (adolescent), HIV/AIDS, smoking prevention, substance abuse, family planning, pregnancy/prenatal care, and violence.

Geographic Area/Unit • State.

Program Setting • Hospital or medical clinic.

Target Population • Male and female Asian Americans, Hispanics, African Americans, whites, Pacific Islanders, Alaskan Natives and Native Americans, of all ages.

CHA Title • Advocates.

CHA Roles • Health promotion/health education, risk assessment, patient/client advocate, social support/counseling, and community advocate.

CHA Information •

Peer workers work an average of 40 hours per month, and receive a salary of \$5.55 per hour. They receive 5 to 10 hours of initial training and 4 hours per month of inservice training. The program does not issue credits or certificates. Program directors and agency staff help train peer workers.

Number of CHAs • 2.

Number of Clients Served • in 12 Months

180.

Methods Used in • Recruiting CHAs

• Word of mouth, using former clients or speakers, and a newsletter.

Methods Used in • Retaining CHAs

• Flexible work hours, job training, and knowledge of the importance of the work.

Methods for Recruiting • Clients

• Word of mouth; school, agency, and community presentations; and professional referrals.

Methods for Retaining • Clients

• Good quality service, expressing the importance of the client, and giving needed assistance in a timely manner.

CHID Accession Number • HE91P0313

Program • Teens on Target.

Contact • Montes, Luis.

Agency • Rancho Los Amigos Medical Center, Building 900, Room 81, 7601 East Imperial Highway, Downey, CA 90242. (310) 940-7847.

Program Dates • May 1992-continuing.

Program Delivery • Schools, community, and hospitals/medical clinics.

Funding Source(s) • Wemgart Foundation, Las Floristas Foundation.

Primary Purpose • To educate youth in Downey, California, about violence prevention to empower them to participate in changing the violent environments in their schools, neighborhoods, and homes.

Methods Employed • Youth panel presentations and peer mentor programs in the schools.

Materials Used • Adolescent Violence Prevention Curriculum, numerous videos, and various other resources.

Health Topic(s) Addressed • Violence.

Geographic Area/Unit • Urban areas in the state.

Program Setting • Community-based agency, hospital/medical clinic, and school.

Target Population • African-American and Mexican-American adolescents and adults.

CHA Title • LA/TNT members.

CHA Roles • Outreach, health promotion, risk assessment, client advocacy, social support, and community advocacy.

• Peer workers average 160 hours worked per month, receive a salary of \$6.75 per hour and a transportation allowance. The program does not issue credits or certificates.

Number of CHAs • 15.

Number of Clients Served • 800. in 12 Months

Recruiting CHAs

Methods Used in • Personal contact, word of mouth, and publicity.

Methods Used in • Retaining CHAs

Positive reinforcement, commitment to an altruistic cause, and personal support groups.

Methods for Recruiting • Clients

Direct contact, word of mouth, and media publicity.

Methods for Retaining • Clients

Addressing the public health aspects of violence, being clear with the facts, and being non-judgmental.

CHID Accession Number • SA94P1573

Arthritis

008

Program • Arthritis Self-Management Program.

Contact • Lorig, Kate.

Agency • Stanford Patient Education Research Center, 1000 Welch Road, Suite 204, Palo Alto, CA 94304. (415) 723-7935.

Program Dates • 1979-continuing.

Program Delivery • Community.

Funding Source(s) • Stanford University Patient Education Research Center, and the Arthritis Foundation.

Primary Purpose • To develop community-based patient education programs which are low cost, easily disseminated, and effective in terms of changes in health status and health care.

Services Offered • Arthritis patient education courses.

Methods Employed • Four lay-led courses are taught: Arthritis self-management in English and Spanish, chronic disease self-management, and AIDS self-management.

Materials Used • Arthritis Self-Management Leader's Manual, Arthritis Helpbook, and Living a Healthy Life With Chronic Conditions.

Health Topic(s) Addressed • Arthritis, HIV/AIDS, stroke, osteoporosis, heart disease, physical activity, and lung disease.

Geographic Area/Unit • International, national, state, county, rural, and urban.

Program Setting • Medical school, Arthritis Foundation.

Target Population • Male and female Asian Americans, Pacific Islanders, Alaskan Natives, Native American tribes from Canada, Hispanic Americans, African Americans and whites, adults to 100 years of age.

CHA Title • Self-management leaders.

CHA Roles • Health promotion/health education.

CHA Information •

Peer workers work an average of 10 hours per month. Compensation is provided at \$100 per course. Each worker receives 15 to 20 initial training hours and 4 to 6 inservice training hours per year. The program issues credits and certificates. Health professionals train peer workers.

Number of CHAs •

• Locally 125. Nationally 500 to 600. Internationally 1,000 to 2,000.

Evaluation Plan •

• Yes.

Methods Used in • Recruiting CHAs

• Word of mouth, former course participants, and talking about program to public groups.

Methods Used in • Retaining CHAs

• Treating peer workers well, keeping them informed, and making expectations clear and limited.

Methods for Recruiting • Clients

Local newsletters/newspapers, word of mouth, and public service announcements.

Methods for Retaining • Clients

• Treating clients with respect and giving them the service promised.

CHID Accession Number •

HE81P0430

Asthma

009

Program • Self-management Program for Severe Asthmatic Children.

Contact • Hanson, Jean.

Agency • University of New Mexico, 2211 Lomas Boulevard, Albuquerque, NM 87131. (505) 272-5551.

Program Dates • August 1992-continuing.

Program Delivery • Homes.

Funding Source(s) • National Institutes of Health, Children's Medical Services.

Primary Purpose • To determine if comprehensive medical care plus an educational asthma self-management program for rural Hispanic children and their families will have an impact on asthma morbidity, as well as on the cost of asthma care and on family adaptation.

Services Offered • Tertiary medical care, educational classes during clinic visits, and home visits.

Methods Employed • Initial, 1 month, 6 month, 1 year, 18 month, and 2 year clinic visits at tertiary setting; 1 hour educational classes using Open Airways at each clinic visit; and home visits spaced 6 times during a 2 year period.

Materials Used • Open Airways curriculum, available in both English and Spanish.

Health Topic(s) Addressed • Asthma.

Geographic Area/Unit • Rural.

Program Setting • University of New Mexico.

Target Population • Infants through adolescents (up to age 19).

CHA Title • Family educators.

CHA Roles • Health education, advocacy services, and social support.

• Family educators receive 16 hours of initial training, and receive compensation for participation in the program. They are trained by nurses, physicians, and social workers.

Number of CHAs • 10.

Number of Clients Served • 100. in 12 Months

Evaluation Plan • An evaluation form is completed by parents participating in the program at 1 year and 2 year intervals.

Methods Used in • Word of mouth. Health professionals recommend parents who show a particular interest in asthma education.

Methods Used in • Monetary compensation, periodic booster training sessions, and individual recognition and appreciation.

Methods for Recruiting • Families who qualify financially, and who have a child with moderately severe to severe asthma.

CHID Accession Number • HE94P1500

Cancer

010

Program • Breast Cancer Education for Older Women.

Contact • Colavecchio, Lillian.

Agency • Massachusetts Association of Older Americans, 110 Arlington Street, Boston, MA 02116. (617) 426-0804.

Program Dates • February 1993-continuing.

Program Delivery • Homes, worksites, the community, and religious organizations.

Funding Source(s) • Massachusetts Department of Public Health.

Primary Purpose • To educate peer trainers to target women over age 60 in communities of color and low income areas.

Services Offered • The program offers workshops for women over age 60 and for paraprofessionals working with them. Workshops are driven by the questions and concerns of the participants.

Materials Used • A curriculum developed by the program; an educational video; and brochures from the American Cancer Society, the National Cancer Institute, and the American Association of Retired People.

Health Topic(s) Addressed • Breast cancer.

Geographic Area/Unit • Women in communities in Massachusetts.

Program Setting • Private, statewide advocacy organization for services.

CHA Title • Breast cancer trainers.

CHA Roles • Outreach, patient advocacy, social support, and community advocacy.

CHA Information • Breast cancer trainers work an average of 1 to 2 hours per month and receive \$50.00 per workshop.

Number of CHAs • 30.

Number of Clients Served • 850. in 12 Months

Methods Used in • Through existing elder networks and through articles in senior newspapers.

Recruiting CHAs

Methods Used in • Followup training, supportive letters, and a payment stipend. Retaining CHAs

Methods for Recruiting • Through posters in housing sites and through personal invitations.

Clients

Methods for Retaining • Followup calls.

Clients

CHID Accession Number • CP94P0656

Program • Colorado Women's Cancer Control Initiative.

Contact • Hau, Barb.

Agency • Colorado Department of Health, Division of Prevention Programs, Cancer Control, PPD-CC-A5, 4300 Cherry Creek Drive South, Denver, CO 80222. (303) 692-2527.

Program Dates • 1991-continuing.

Program Delivery • Homes, public health clinics, worksites, community, hospitals/medical clinics, and religious organizations.

Funding Source(s) • Centers for Disease Control and Prevention, and the National Cancer Institute.

Primary Purpose • To reduce morbidity and mortality associated with breast and cervical cancer in Colorado, promote access to high quality economically available screening services, and promote routine screening adherence by women and their health care providers.

Services Offered • Breast and cervical cancer screening and followup services, and public education.

Methods Employed • Small interpersonal group presentations using community volunteers from the target population as facilitators, marketing of promotional materials, and local media outreach.

Materials Used • A developed curriculum to train peer volunteers; video of training session; brochures, developed media, marketing, and speaker's bureau training manuals in English and Spanish; Women's Health Calendar; and promotional materials (notepads, magnets, posters).

Health Topic(s) Addressed • Breast and cervical cancer.

Geographic Area/Unit • State, county, urban, and rural.

Program Setting • State health department.

Target Population • Mexican-American, African-American, and white adult females.

CHA Title • Coalition Members.

CHA Roles • Outreach, health promotion/health education, and community advocate.

CHA Information •

Peer workers work an average of 4 to 8 hours per month. They are not compensated. The program issues certificates but not credits. Nurses, health educators, and the program coordinator help train the peer workers.

Number of CHAs • 140.

Number of Clients Served • in 12 Months

2,810.

Evaluation Plan •

Yes. Consumer surveys, facility surveys and inspections, and random sample followup surveys. The initial informal evaluation indicates a positive response.

Methods Used in • Recruiting CHAs

• Word of mouth, attending an intervention activity, and media.

Methods Used in • Retaining CHAs

• Involving peer workers in planning, designing, and implementing interventions; frequent sharing of feedback; and progress in reaching goals.

Methods for Recruiting • Clients

• Word of mouth, educational interventions, promotional materials, and having the central phone number listed.

Methods for Retaining • Clients

• Interpersonal intervention methods; using peers woman-to-woman; Women's Health Calendar reminder; and enrollment of each woman in a public education database for tracking and followup.

CHID Accession Number • CP94P0632

Program • Companeros en la Salud.

Contact • Coe, Kathryn.

Agency • Arizona State University, Hispanic Research Center, Tempe, AZ 85287. (602) 965-0747.

Program Dates • September 1991-continuing.

Program Delivery • Homes, religious organizations, and other locations in the community.

Funding Source(s) • National Cancer Institute.

Primary Purpose • To reduce the risk of breast, cervical, and diet-related cancers among Hispanic women, and to improve family mental health among Hispanic families.

Services Offered • Provide information on cancer, nutrition, family communication, stress management, building self-esteem, substance abuse, and family mental health.

Methods Employed • Courses and classes, cooking demonstrations, health fairs, and mobile clinics.

Materials Used • A self-developed curriculum, brochures, cookbooks, and videotapes.

Health Topic(s) Addressed • Breast, cervical, and diet-related cancers, substance abuse, depression, stress management, family communication, and self esteem.

Geographic Area/Unit • Family units and communities.

Program Setting • Homes, religious institutions, and other locations in the community.

Target Population • Hispanic American women ages 18 through 64.

CHA Title • Promotoras.

CHA Roles • Outreach, health education, risk assessment, client advocacy, social support, transportation, and community advocacy.

• Promotoras average 4 hours worked per month and receive a stipend of \$500 per year. They receive 30 hours of initial training and 2 hours of inservice training each month. The program issues certificates to participants.

Number of CHAs • 30.

Number of Clients Served • 2000. in 12 Months

> Evaluation Plan • Yes.

Methods Used in • Recruiting CHAs

Asking pastors and church secretaries for suggestions. Focus groups are also held as a recruitment method.

Methods Used in • Retaining CHAs

Interest in preventing cancer, through their concern for the community, and through mutual motivation.

Methods for Recruiting • Clients

Flexible scheduling, meeting their perceived needs, and offering something they value.

Clients

Methods for Retaining • Use of methods similar to recruitment methods.

Program • Companeros en la Salud: Cancer Control Among Hispanics.

Contact • Campbell, Nadia.

• San Diego State University Foundation, 6363 Alvarado Court, No. 225, San Diego, CA 92120. (619) 594-1976.

Program Dates • September 1991-continuing.

Program Delivery • Religious organizations.

Funding Source(s) • National Cancer Institute.

Primary Purpose • To increase knowledge of breast and cervical cancer screening, increase utilization of these screening tests, and increase fiber intake and decrease fat intake.

Services Offered • Educational classes in church settings.

Methods Employed • Using the Social Learning Theory as an intervention strategy.

Materials Used • A train-the-trainer manual on breast and cervical cancer and nutrition, which will be used by the peer workers, is being developed by San Diego State University.

Health Topic(s) Addressed • Breast and cervical cancer and nutrition.

Geographic Area/Unit • Urban and multi-state.

Program Setting • University.

Target Population • Mexican-American female population between the ages of 20 and 64.

CHA Title • Promotoras.

CHA Roles • Outreach, health promotion or health education, and community advocate.

• Each community health advisor (CHA) receives 28 hours of initial training, 1 to 2 hours of inservice training each month by health educators and other peer health workers, and an \$800 per year stipend.

Number of CHAs • 20.

Cancer

Methods Used in • Recruiting CHAs

Face-to-face recruitment, working with priest/pastors, and recruitment by peer workers.

Methods Used in • Retaining CHAs

Continuing inservice training and offering nonmonetary incentives.

Clients

Methods for Recruiting • Word of mouth and telephone contact.

Methods for Retaining • Clients

New educational themes, promotion of classes by a priest/pastor, and publicity within the churches.

Program • Juntos Contra el Comer (Together Against Cancer).

Contact • Lash, Sallie.

Agency • Arizona Cancer Center, 1601 North Tucson Building, Suite No. 29, Tucson, AZ 85716. (602) 626-4972. (602) 626-2601.

Program Dates • July 1992-continuing.

Program Delivery • Schools, homes, and community.

Funding Source(s) • Arizona Disease Control Research Commission.

Primary Purpose • To increase knowledge of and screening behavior for cervical cancer and breast cancer among Mexican-American women residing in Tucson, Arizona.

Services Offered • Individual support and education about cervical cancer and breast cancer prevention, and assistance in making Papanicolaou (Pap) smear appointments in low cost or no cost Family Planning Clinics near clients' homes.

Methods Employed • Door-to-door meetings in neighborhoods to show and discuss prevention-oriented movies.

Materials Used • A developed curriculum, a cancer prevention game, and brochures in both English and Spanish.

Health Topic(s) Addressed • Cervical and breast cancer.

Geographic Area/Unit • Rural, urban, and family units, and communities.

Program Setting • Local health department.

Target Population • Mexican-American women between the ages of 20 and 64.

CHA Title • Promotoras de Salud.

CHA Roles • Outreach, health promotion or education, patient/client advocate, social support or counseling, and community advocate.

• Each peer health worker receives 51 hours of initial training and approximately 6 hours of inservice training every month. Peer workers are trained by program coordinators, doctors, nutritionists, nurses, community workers, and information and referral representatives. The workers work an average of 20 hours per month for \$6.50 per hour.

Number of CHAs • 6.

Number of Clients Served • 300. in 12 Months

Evaluation Plan • Yes. A questionnaire designed to improve promotora programs. The evaluation should be completed by December 1994.

Methods Used in • Recruiting CHAs

• Getting referrals from the Hispanic Community Health Council, word of mouth, and advertising in local public schools.

Methods Used in • Retaining CHAs

• Flexibility in working hours, awarding of certificates, and creating teams of two for safety and support.

Methods for Recruiting • Clients

Appealing to the client's role as a mother in the family, using other promoters
who are bilingual, bicultural, and from the client's own community, and
hiring older women for cervical cancer education.

Methods for Retaining • Clients

• Followup, support in other ares of concern, offering medical services managed by other women, and having a bilingual staff.

Program • KEYS: A Rural Health Outreach Program.

Contact • Watkins, Kelle.

Agency • Terry Reilly Health Services, 1504 3rd Street, N., Nampa, ID 83687. (208) 467-7654.

Program Dates • September 1991-continuing.

Program Delivery • Worksites, homes, community, migrant centers or camps, and public health clinics.

Funding Source(s) • KEYS: Rural Health Outreach Grant.

Primary Purpose • To provide solutions to traditional barriers to care in rural areas such as Southwest Idaho. To help county residents overcome the barriers to care such as distance and lack of transportation, language barriers, and lack of knowledge about services and how to access them.

Services Offered • A coordinated transportation system to increase utilization of available services, direct provision of dental and perinatal support services, comprehensive case management with the family unit during pregnancy and up to 2 years after birth, free pregnancy tests, assistance with Medicaid and other financial aid forms, childbirth education, support groups, and outreach.

Materials Used • Brochures concerning health care during pregnancy and infant care, educational videos, and teaching aides. All materials are in Spanish.

Health Topic(s) Addressed • Family planning, nutrition, pregnancy and prenatal care, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural.

Program Setting • Medical clinics.

Target Population • Mexican-American infants and adults, pregnant and parenting clients at the Homedale and Marsing Clinics, and the Spanish-speaking perinatal clients from the Nampa Clinic.

CHA Title • Perinatal outreach specialists, perinatal health promoters, or family health promoters.

CHA Roles • Outreach, health promotion or health education, risk assessment, and patient/client advocate.

CHA Information • Peer health workers receive \$9 per hour, are provided with health insurance, continuing education, and a pension plan.

Number of CHAs •

Evaluation Plan •

Yes. The evaluation plan assesses whether the KEYS program has increased access to and utilization of existing services in the target area and examines whether there are increased numbers of people served by the KEYS direct service component. Perinatal data will be collected using intake, outcome, client and infant followup, encounter, and exit forms by the case managers and outreach specialist. At present, the results of this evaluation are not available.

Methods Used in • Recruiting CHAs

Advertising in local papers, word of mouth, and past volunteers.

Methods Used in • Retaining CHAs

Reasonable caseloads, bilingual pay differential, and good communication between workers and supervisors.

Methods for Recruiting • Clients

Free pregnancy test program, frequent personal contact within individual clinic sites, and using other outreach clients for referrals.

Methods for Retaining • Clients

Seeing clients frequently at clinic visits, fostering relationships with clients, and home visits.

Program • Maryland Breast and Cervical Cancer Program.

Contact • Gugel, Donna.

Agency • Maryland Department of Health and Mental Hygiene, Division of Cancer Control, 201 West Preston Street, Room 304, Baltimore, MD 21201. (410) 225-5281.

Program Dates • January 1992-continuing.

Program Delivery • Schools, worksites, religious organizations, homes, public health clinics, hospitals, and other community locations.

Funding Source(s) • Centers for Disease Control and Prevention, and the Maryland State Governor's Cancer Initiative.

Primary Purpose • To provide screening and followup services to Maryland residents statewide who qualify for the program.

Services Offered • Pap tests, pelvic exams, clinical breast exams, mammograms, colposcopy, and treatment.

Methods Employed • Door-to-door outreach, mass media campaigns, community presentations, and networking with other groups.

Materials Used • Videos entitled Straight Talk about Mammography, Healthy Aging is Up to You, Once a Year for a Lifetime, and Get a New Attitude. Brochures and handouts are also used.

Health Topic(s) Addressed • Breast and cervical cancer.

Geographic Area/Unit • Rural and urban areas throughout the state.

Program Setting • Community-based agency, local health department, hospital or medical clinic, state health department, and other locations in the community.

Target Population • African-American, white, Hispanic American, Native American, Cambodian, and Vietnamese adult women.

CHA Title • Community outreach workers.

CHA Roles • Outreach, health education, patient advocacy, social support, transportation, and community advocacy.

CHA Information • Peer workers average 80 hours worked per month. They receive 8 hours of initial training at the State level, with counties providing additional training. Peer workers receive 4 additional hours quarterly of inservice training. They are compensated for their services.

Number of CHAs 48.

Number of Clients Served • in 12 Months

50,000.

Evaluation Plan •

Yes. Asking women entering the program how they learned about the program.

Methods Used in • Recruiting CHAs

Personal recommendations, identifying breast and cervical cancer survivors in the community, and recruiting women who have been through the program as clients.

Methods for Recruiting • Clients

Door-to-door recruitment, newspaper notices, and doctor referral.

Methods for Retaining Clients

Personal contact with outreach workers or the nurse coordinator.

CHID Accession Number •

CP94P0657

Program • Mountain Surveillance and Counseling Outreach Project (Mountain SCOut).

Contact • Adams, Cindy.

• Kentucky Cancer Program, 206 Davis Mills Building/MRISC, 800 Rose Street, Lexington, KY 40536. (606) 257-4033.

Program Dates • 1991-continuing.

Program Delivery • Homes, community, public health clinics, and community health centers.

Funding Source(s) • Ware Foundation and the Kentucky Department of Health and Human Services.

Primary Purpose • To improve low-income women's compliance with prevention and early detection regimens for breast and cervical cancer; to increase screening for breast and cervical cancer in six Appalachian counties in Kentucky, especially for older women; to detect such cancers early enough to reduce mortality and increase survival rates; and to develop an awareness, especially on the part of older women, that they can maintain their health by appropriate preventive care.

Services Offered • Paraprofessional women serve as an information flow link to the established health care services available to individuals living in these target areas.

Methods Employed • Local women are trained to educate and support other women in matters related to the prevention and early detection of breast and cervical cancer.

Materials Used • Videos, brochures, fact sheets, curriculum lessons, and teaching aids.

Health Topic(s) Addressed • Breast and cervical cancer and smoking prevention.

Geographic Area/Unit • Rural and multi-county.

Program Setting • Community-based agency, local health department, and state health department.

Target Population • White adult females between the ages of 20 and 64.

CHA Title • Mountain SC-Outs.

CHA Roles • Outreach, health promotion or health education, patient/client advocate, and transportation provider.

CHA Information •

Each peer health worker receives 40 hours of initial training as an apprentice and between 2 to 3 hours of inservice training every month from physicians, health educators, social workers, VISTA nurses, and other peer workers. The peer workers are paid \$5 per person tested. A \$200 bonus is given to the team that meets the goal, a \$2000 bonus is distributed if all the teams meet the annual goal, and certificates are awarded.

Number of CHAs • 30.

Number of Clients Served • 450. in 12 Months

Methods Used in • Recruiting CHAs

 Working with grass-roots organizations, personal contact through the network of relations within the community, and offering services and incentives that touch them personally.

Methods Used in • Retaining CHAs

 Giving substantial ownership of the local program to local people, flexible scheduling and forms of payment for services that do not jeopardize existing arrangements, ongoing learning and training experiences, and team organization.

Methods for Recruiting • Clients

 Meeting people in community spaces such as post offices and stores, providing incentives and bonuses to teams that meet annual targets, and identifying and removing barriers to health care.

Methods for Retaining • Clients

• Turning clients into recruiters, following up 1 or 2 years after completion of the program, and intensive work and education concerning high risk areas.

Program • Save Our Sisters.

Contact • Eng, Eugenia.

• University of North Carolina at Chapel Hill, School of Public Health, HBHE, Rosenau Hall, Campus Box No. 7400, Chapel Hill, NC 27599. (919) 966-3909.

Program Dates • June 1989-continuing.

Program Delivery • Homes, public health clinics, worksites, religious organizations, and other locations in the community.

Funding Source(s) • National Cancer Institute under the Minority Cancer Control Research Program.

Primary Purpose • To increase rates of breast cancer screening among African American women over age 50 in New Hanover County, North Carolina.

Services Offered • Counseling about breast cancer and screening, assistance with scheduling appointments for mammograms and with filling out insurance forms, and identifying sources of funding for mammograms. The program sponsors a mobile mammography unit twice a year to provide screening for women in their neighborhoods.

Methods Employed
 Lay health advisors speak with individuals or groups about screening; groups may be churches, schools, reunion groups, or other groups with older African American women members. Advisors also wear T-shirts and buttons with statements such as Do the Right Thing: Get a Mammogram, to attract attention and stimulate discussion.

Materials Used • A developed curriculum, video, brochure, mammogram campaign planning guide, and a guide to producing a video.

Health Topic(s) Addressed • Breast cancer.

Geographic Area/Unit • Rural, county, and communities.

Program Setting • Communities.

Target Population • Target population is African-American female adults.

CHA Title • SOS advisors.

CHA Roles • Outreach, health promotion/health education, patient/client advocate, social support/counseling, transportation provider, and community advocate.

• Each peer worker receives 15 hours of initial training and 3 inservice training hours per month. Compensation is not provided. The program does not issue credits. The program does issue certificates. Peer workers are trained by doctors, nurses, social workers, psychologists, and health educators.

Number of CHAs • 95.

Number of Clients Served • 1,500. in 12 Months

Evaluation Plan • Yes.

Methods Used in • The Community Advisory Group and the Training Committee recruits initial Recruiting CHAs SOS advisors.

Methods Used in • Monthly meetings in small groups to plan and carry out projects, and projects that have tangible products such as a video, brochure, or mammogram mobile unit campaign.

Methods for Recruiting • Mammogram campaigns held at churches.

Clients

Methods for Retaining • SOS advisors do a followup one year after the first mammogram.

Clients

College

019

Program • Travel Counseling Peer Instruction Program.

Contact • Bell, Ola.

Agency • University of Texas, Austin, Student Health Center, Box 7339, U.T. Station, Austin, TX 78713. (512) 471-4955, ext. 234.

Program Dates • January 1992-continuing.

Program Delivery • Hospitals and medical clinics.

Funding Source(s) • University of Texas.

Primary Purpose • To use students to prepare students, staff, and faculty for travel and study abroad.

Services Offered • Student counselors provide accurate information about health risks unique to foreign countries, travel advisories, and prevention of common illnesses travelers experience.

Materials Used • A developed curriculum which consists of a syllabus and an education booklet.

Health Topic(s) Addressed •

• Trip planning, risks from food and drink, minor diarrhea, insects and insect avoidance, protection against malaria, anti-malarial medications, common health risks for travelers, immunizations, returning from a trip, general medical information, cards and bracelets for medical conditions or allergies, medical history, HIV/AIDS, motion sickness, altitude illness, jet lag, traveler's medical kits, sunburn and sunscreens, animal bites, if illness occurs, and accident prevention.

Geographic Area/Unit • University of Texas campus.

Program Setting • College health service.

Target Population • All students attending the University of Texas.

CHA Title • Travel counseling peer instructors.

CHA Roles • Health promotion and health education.

CHA Information •

Each semester, two students are selected to become travel counseling peer instructors. Students participating in the program are required to attend 10 hours of training and work 16 to 20 hours per month teaching travel clinic programs. They receive course credit for their participation.

Number of CHAs • 2.

Number of Clients Served •

• 225.

in 12 Months

Methods Used in • Recruiting CHAs

• Advertising in local newspapers, recommendation by friends and flyers.

Methods Used in • Retaining CHAs

• When program is taken for class credit, careful screening of applicants, and making sure the peer workers understand the obligation (e.g., time).

Methods for Recruiting • Clients

Required by some programs (programs abroad); free of charge to university students; and current, up-to-date information.

Program • Upper Respiratory Clinic Program.

Contact • Bell, Ola.

Agency • University of Texas, Austin, Student Health Center, Box 7339, U.T. Station, Austin, TX 78713. (512) 471-4955, ext. 234.

Program Dates • 1984-continuing.

Program Delivery • Hospitals and medical clinics.

Funding Source(s) • University of Texas.

Primary Purpose • Students working as Upper Respiratory Clinicians in the Health Center's Upper Respiratory Clinic provide direct health care and education to patients going through the clinic.

Services Offered • Student clinicians take vital signs, medical history, and complaints of patients coming into the clinic; counsel patients after they see the doctor or nurse about over-the-counter medications, symptoms indicating a need to return to the clinic, and how patients can minimize the transmission of their infection to family and friends.

Health Topic(s) Addressed • Respiratory health.

Geographic Area/Unit • University of Texas campus.

Program Setting • College health service.

Target Population • All students attending the University of Texas.

CHA Title • Upper respiratory clinicians.

CHA Roles • Health promotion or health education and patient/client treatment or services.

• Student workers volunteer to work 6 hours a week in the clinic. Training includes 16 hours prior to the start of the semester; and class work on upper respiratory diseases, over-the-counter medications, and medical laboratory functions. Training is provided by health center doctors, nurses, medical technologists, and University of Texas School of Pharmacy instructors. The students, many of whom are premed students, gain hands-on patient experience, credit for a two college-credit-hour class, and eligibility to participate in staff benefits for student health center staff. They work approximately 25 hours per month.

Number of CHAs • 12 to 15 students each semester.

Number of Clients Served • 800. in 12 Months

Methods Used in • Notices placed in local newspapers, recommendation by friends, and flyers.

Recruiting CHAs

Methods Used in • Taking the course for college credit, careful screening of applicants, and making Sure they understand obligations (e.g., time).

Diabetes

021

Program • Community Health Worker Outreach Program.

Contact • Curry, Sheila J.

• University of Maryland at Baltimore School of Pharmacy, Allied Health Building, Room 234, 100 Penn Street, Room 234, Baltimore, MD 21201. (410) 328-5044.

Program Dates • October 1991-continuing.

Program Delivery • Homes and community.

Funding Source(s) • Health Services Cost Review Commission.

Primary Purpose • To train volunteers from the community as health care workers to promote secondary prevention among Medical Assistance (MA) patients, and to help reduce mortality and morbidity caused by diabetes mellitus or high blood pressure.

Services Offered • Provide non-clinical peer support to individuals with hypertension and/or diabetes.

Methods Employed • Monitoring patients, providing educational materials, and reinforcing compliance with treatment plans.

Materials Used • Adapted curriculum, purchased videos, developed training guide, and adapted/developed resource directory.

Health Topic(s) Addressed • High blood pressure, smoking prevention, nutrition, diabetes, heart disease, and physical activity.

Geographic Area/Unit • Urban.

Program Setting • Schools.

Target Population • Male and female African-American and white adults.

CHA Title • Community health worker (CHW).

CHA Roles • Health promotion/health education, social support or counseling, risk assessment, and patient/client advocate.

Diabetes

CHA Information • Peer workers work an average of 15 to 30 hours per month. The program provides compensation at \$45 to \$75 per month. Other compensation includes a monthly MTA bus pass. Each worker receives 60 hours of initial training and 4 hours of inservice training per month. The program does not issue credits. It does issue certificates. Peer workers are trained by the program coordinator, diabetes educators, and health educators.

Number of CHAs •

Number of Clients Served • in 12 Months

200 to 500.

Evaluation Plan • Yes.

Methods Used in • Recruiting CHAs

Church organizations, word of mouth referral, and health care organizations.

Methods Used in . Retaining CHAs

Special events for CHW groups, continuous supervision/reinforcement and positive reinforcement from staff and peers.

Methods for Recruiting • Clients

Personal phone calls from CHW's.

Methods for Retaining • Clients

Regular contacts with CHW's, and CHW's successfully helping patients with problems.

Program • Comprehensive Diabetic Education Program.

Contact • Ingram, Judy.

Agency • La Clinica de Familia, Inc., P.O. Drawer 70, Mesilla, NM 88046. (505) 526-1105.

Program Dates • September 1992-continuing.

Program Delivery • Homes, the community, and hospitals/medical clinics.

Funding Source(s) • Administration for Children and Families.

Primary Purpose • To improve medical outcomes and compliance among New Mexico's patients with diabetes.

Services Offered • Outreach, screening, followup, education, and referrals.

Methods Employed • Case management with home visits, risk assessments, and training in self monitoring. Educational classes, educational videos, teaching aids, and a resources directory are the materials used by the program and are written in both Spanish and English.

Health Topic(s) Addressed
 Cholesterol screening and education, diabetes, family planning, heart disease, high blood pressure, nutrition, pregnancy and prenatal care, physical activity, adolescent sexual behavior, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural and family units, and communities in New Mexico.

Program Setting • Community-based agency and medical clinics.

Target Population • Male and female Mexican Americans and whites from infancy to adulthood.

CHA Title • Promotoras/community health workers.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocacy, social support or counseling, and community advocacy.

CHA Information • Peer health workers work approximately 80 hours each month for \$5.25 per hour.

Number of CHAs • 2.

Number of Clients Served • 75. in 12 Months

Evaluation Plan • Under revision.

Methods Used in • Word of mouth, newspaper advertisements, and other agencies' referrals.

Recruiting CHAs

Methods Used in • Empowerment, pay, and social rewards. Retaining CHAs

Methods for Recruiting • Provider referrals and word of mouth.

Clients

Methods for Retaining • Repetition, inclusion of family, flexibility of staff, and reinforcement.

Clients

Program • Diabetes Outreach Project.

Contact • Langmuir, Susan.

Agency • Health Promotion Council of Southeastern Pennsylvania, Inc., 311 South Juniper Street, Suite No. 308, Philadelphia, PA 19107. (215) 546-1276.

Program Dates • August 1993-continuing.

Program Delivery • Homes.

Funding Source(s) • Health Management Alternatives, Inc., and by the Health Promotion Council of Southeastern Pennsylvania, Inc.

Primary Purpose • To reduce hospitalization and emergency room visits among diabetic clients, promote self-advocacy, and build client-provider relationships.

Services Offered • A full-time Community Health Worker (CHW), preferably an individual with diabetes, is supervised by a physician assistant and provides home visit services for evaluation, education and advocacy/mentoring. The CHW's also assist with glucose and blood pressure monitoring.

Materials Used • Videos and low-literacy brochures that can be purchased.

Health Topic(s) Addressed • Diabetes, high blood pressure, nutrition, and physical activity.

Geographic Area/Unit • Urban.

Program Setting • Community-based agency.

Target Population • African-American adults between the ages of 20 and 64 with diabetes.

CHA Title • Community health workers.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, and social support or counseling.

• The CHW's receive 80 hours of initial training by the program coordinator, nurses, peer workers, and outside consultants. CHW's work an average of 140 hours per month, are paid approximately \$7 per hour, and receive health insurance, a transportation pass, vacation, holidays, and sick days.

Number of CHAs • One full-time Community Health Worker and one half-time Project Coordinator.

Diabetes

Number of Clients Served • 110 a in 12 Months for di

110 adults with diabetes who have had one or more admissions to the hospital for diabetes in the last 18 months.

Evaluation Plan •

An evaluation plan is presently being developed.

Methods Used in • Recruiting CHAs

• Recommendations from the teacher of the diabetes education class.

Methods Used in Retaining CHAs

• Recommendations from the teacher of the diabetes education class.

Methods for Recruiting • Clients

• Recommendations from the teacher of the diabetes education class.

Methods for Retaining • Clients

Recommendations from the teacher of the diabetes education class.

Program • Illinois Diabetes Control Program.

Contact • Nandi, Chandana.

• Illinois Department of Public Health, Division of Health Promotion, 535 West Jefferson Street, Springfield, IL 62761. (217) 524-3821.

Program Dates • July 1978-continuing.

Program Delivery • Public health clinics, in hospitals, and in other community locations.

Funding Source(s) • Illinois Department of Public Health.

Primary Purpose • To ensure that persons with diabetes who are at high risk of diabetic complications are identified, entered into the health care system, and receive ongoing preventive care and treatment including patient education.

Services Offered • Patient registry, educational programs, and patient services.

Methods Employed • Extensive networking with other groups and organizations to achieve its goals.

Materials Used • A manual entitled Guide for Developing a Diabetes Eye Disease Program in
Rural Health Departments, a survey entitled A Profile of Diabetes Health Care
Services, a curriculum entitled Cook County Department of Public Health
Diabetes Self-Management Program, a brochure entitled Health Care Tips for
Diabetics, a brochure entitled Diabetes Good Hygiene, and various flyers.

Health Topic(s) Addressed • Diabetes.

Geographic Area/Unit • Communities in the county.

Program Setting • State health department.

Target Population • African-American, white, and Mexican American adults.

CHA Title • Health advocates.

CHA Roles • Outreach, health education, risk assessment, patient advocacy, patient services, and social support.

• Health advocates work an average of 25 hours per month. They receive a salary and benefits. Each peer worker receives seven and a half hours of initial training, followed by two inservice training sessions per month.

Number of CHAs • 8.

Number of Clients Served • 4,289. in 12 Months

Evaluation Plan • Yes.

Methods Used in • Networking with other existing programs, making home visits to housing projects, and using flyers at community sites such as health fairs, churches, and grocery stores.

Methods for Retaining • Individualized followup and short term financial assistance organized by a volunteer group.

Program • Taking Control: High Blood Pressure Education Program.

Contact • Merrick, Delores.

Agency • Health Promotion Council of Southeastern Pennsylvania, 311 South Juniper Street, Suite 308, Philadelphia, PA 19107. (215) 546-1276.

Program Dates • March 1993-continuing.

Program Delivery • Public health clinics.

Funding Source(s) • Federal, state, and private foundation.

Primary Purpose • To enable Philadelphia's low income African-American adults with hypertension and diabetes to live healthier, self-sufficient and longer lives through a community based prevention and treatment program.

Services Offered • 2-day educational classes and 1 year followup via community health workers trained in blood pressure measurement and techniques.

Methods Employed • Patient referrals, pre- and post-knowledge assessments, class enrollment, and peer worker visits.

Materials Used • Curricula, videos, teaching aids, handouts, and food labels of common foods.

Health Topic(s) Addressed • Diabetes, heart disease, high blood pressure, nutrition, and stroke.

Geographic Area/Unit • Urban areas.

Program Setting • Community-based agency, local health department, and state health department.

Target Population • African-American adults.

CHA Title • Community health workers.

CHA Roles • Outreach and health promotion or education.

CHA Information • Community health workers receive compensation. The program issues certificates.

Number of CHAs • 2.

Diabetes

Number of Clients Served • 71. in 12 Months

Evaluation Plan • Developing an evaluation plan.

Methods Used in • Referrals from health center staff and through referrals from the Health Promotion Council.

Methods Used in • Through a well defined job description, adequate training, and constant support.

Methods for Recruiting • Referrals from doctors, nurses, and patients.

Clients

Methods for Retaining • Requiring patient participation, providing information in a way that is understandable, respecting them as adults, and being culturally sensitive.

Family

026

Program • Asian Health Services, Health Education Department.

Contact • Lew, Rod.

Agency • Asian Health Services, 310 8th Street, Suite 200, Oakland, CA 94607. (510) 465-3273.

Program Dates • 1973-continuing.

Program Delivery • Schools, worksites, religious organizations, homes, community, and public health clinics.

Funding Source(s) • Various federal, state, and local sources.

Primary Purpose • To distribute health information to the Asian American community in Oakland through basic outreach, health fairs, education, and community programs.

Services Offered • Blood pressure screening and distribution of health information materials.

Materials Used • Brochures, pamphlets, posters, books, training guides, educational manuals, and videos which can be purchased. Most are available in either English, Korean, Vietnamese, Chinese, or Tagalog.

Health Topic(s) Addressed • Cancer research, diabetes, family planning, high blood pressure, HIV/AIDS, nutrition, pregnancy and prenatal care, physical activity, smoking prevention, and tuberculosis.

Geographic Area/Unit • County, family units, and communities.

Program Setting • Community-based agency.

Target Population • Koreans, Laotians, and Vietnamese children, adolescents, and adults.

CHA Title • Community health workers or community health specialists.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, patient/client treatment or services, social support or counseling, and community advocate.

CHA Information •

Each peer worker receives approximately 2 weeks of initial training and 4 hours of inservice training each month, which is conducted by health educators and the program coordinator. The peer workers work an average of 150 hours per month at \$10-\$12 per hour.

Number of CHAs • 11.

Methods Used in • Recruiting CHAs

• Reputation of organization, exciting program and room for growth, and funding.

Methods Used in • Retaining CHAs

• Ability to meet salary needs, funding, and meeting needs of staff.

Methods for Recruiting • Clients

• Good outreach and culturally competent care.

Methods for Retaining • Clients

• Culturally competent services and funding.

Program • Child Protection Team-Prevention Project.

Contact • Ebeoglu, Sheryl.

Agency • Northwest Florida Comprehensive Services for Children, Inc., 340 Beal Parkway, NW., Fort Walton Beach, FL 32548. (904) 833-3949.

Program Dates • June 1983-continuing.

Program Delivery • Schools, homes, and the community.

Funding Source(s) • Various federal, state, and local sources.

Primary Purpose • To prevent child abuse and neglect, assist parents to be more knowledgeable and nurturing, and help families to access needed resources.

Services Offered • Three mother-to-mother programs, four family resource centers, and an infant learning project.

Methods Employed • In-home education and support, parent education classes, personal safety programs for school children, loans, clothing closet, car seat loan program, teenage parent support group, and childbirth education and basic infant care classes for teenage parents.

Health Topic(s) Addressed • Family planning and pregnancy/prenatal care.

Geographic Area/Unit • Rural, urban, multi-county, community, and family units.

Program Setting • Community-based agency.

Target Population • African-American and white females of all ages.

CHA Title • Parent aides and therapeutic homemakers.

CHA Roles • Patient/child advocate, social support or counseling, and transportation provider.

CHA Information • Each CHA works approximately 2-80 hours per month for \$6.25 per hour and \$5-7.50 per home visit after receiving approximately 16-60 hours of initial training. CHA's receive certificates.

Number of CHAs • 14.

Number of Clients Served • 463. in 12 Months

Evaluation Plan • Evaluation on patient satisfaction and program effectiveness used questionnaires. Pre- and posttests assessed dimensions of distress, rigidity, unhappiness, problems with child and self, family, and others.

Methods Used in • Newspaper advertising, radio advertising, and speaking to college classes. Recruiting CHAs

Methods Used in • Support and availability of consultant, group meetings, and group projects.

Retaining CHAs

Methods for Recruiting • Word of mouth, voluntary programs, and personal contacts.

Clients

Methods for Retaining • Establishing nurturing relationships, providing concrete assistance, and the assistance of an advocate in obtaining services.

Program • Florida First Start.

Contact • Thomas, Patty B.

Agency • Florida Department of Education, 325 West Gaines Street, Suite 754, Tallahassee, FL 32399. (904) 922-0034.

Program Dates • January 1990-continuing.

Program Delivery • Schools and homes.

Funding Source(s) • Florida Department of Education.

Primary Purpose • To give children the best possible start in life and to support parents in their role as the child's first teachers.

Services Offered • Parent resource center, home visits, child screenings, family group meetings, and interagency collaboration and networking.

Methods Employed • Parent educators deliver a flexible program which provides comprehensive family-based support.

Materials Used • The program maintains a large collection of lending library materials including developmentally appropriate playthings and books.

Health Topic(s) Addressed • Nutrition and substance abuse.

Geographic Area/Unit • Rural and urban communities.

Program Setting • Schools.

Target Population • African-American and white parents and their infants.

CHA Title • Parent educators.

CHA Roles • Outreach, health education, risk assessment, client advocacy, social support, location of transportation, and community advocacy.

CHA Information • The average number of hours worked per month varies. Workers receive compensation. They receive initial training of a minimum of 120 hours. Workers receive credits and certificates.

Number of CHAs • 80.

Number of Clients Served • 2,000. in 12 Months

Evaluation Plan • The program evaluates children's behavior, growth and development, achievement, and success in school. It also evaluates the families' continued involvement with the education of their children.

Methods Used in • Governed by law. They must live in the area being served. Recruiting CHAs

Methods Used in • Training and the furthering of their education.

Retaining CHAs

Methods for Recruiting • Recruitment of clients is also specified by law.

Clients

Program • Gladstone Family Nursing Center.

Contact • Borman, Jan.

Agency • St. Xavier University, School of Nursing, 3700 West 103rd, Chicago, IL 60655. (312) 298-3718.

Program Dates • September 1993-continuing.

Program Delivery • Schools, homes, and other community locations.

Funding Source(s) • Public Health Service, Division of Nursing.

Primary Purpose • Gladstone Family Nursing Center provides primary health care services to families using Gladstone Elementary School as the point of entry.

Methods Employed • Empowering families to participate in primary health care using referral and advocacy strategies.

Health Topic(s) Addressed • Family planning, high blood pressure, HIV/AIDS, injuries, nutrition, sexual behavior, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Urban community.

Program Setting • School and university.

Target Population • African-American, white, and Mexican American families and their children.

CHA Title • Community health advocates.

CHA Roles • Outreach, health education, client advocacy, and community advocacy.

CHA Information • Community health advocates work an average of 140 hours per month. They are paid \$7.70 per hour. Peer workers receive 110 hours of initial training followed by 5 hours per month of inservice training.

Number of CHAs • 2.

Evaluation Plan • Yes.

Methods Used in • Recruiting CHAs

Word of mouth, advertisements in community papers, and personal references.

Methods Used in • Retaining CHAs

Salary, continuing education opportunities, and being valued as team members.

Methods for Recruiting • Clients

School.

Program • Neighborhood Health Promoters.

Contact • Dorsey, Carmalyn S.

Agency • Julie Community Center, 100 South Washington Street, Baltimore, MD 21231. (410) 675-6300.

Program Dates • 1975-continuing.

Program Delivery • School, homes, and other community locations.

Funding Source(s) • Julie Community Center.

Primary Purpose • To improve the health and self esteem of low income families.

Services Offered • Free mammograms, health education and health promotion programs, and help with cleaning for frail elderly.

Methods Employed • Outreach and education classes.

Health Topic(s) Addressed • Family planning, pregnancy and prenatal care, sexual behavior, substance abuse, child abuse, parenting, and early childhood development.

Geographic Area/Unit • Urban family units.

Program Setting • Community-based agency.

Target Population • African-American, white, Native American, and Hispanic American families.

CHA Title • Neighborhood health promoters.

CHA Roles • Outreach, health promotion, client advocacy, social support, and community advocacy.

CHA Information • Neighborhood health promoters work an average of 6 hours per month. They receive a stipend of \$7.50 per hour. Peer workers receive 10 to 12 hours of initial training and 2 to 4 hours of inservice training per month.

Number of CHAs • 8.

Number of Clients Served • 450. in 12 Months

Methods Used in • Recruiting CHAs

School counselors, referrals from other health promoters, and referrals from church volunteers.

Methods Used in • Retaining CHAs

Training, a stipend, and awards.

Methods for Recruiting • Clients

Local schools and Head Start, and through social workers and pediatric clinics.

Methods for Retaining • Clients

Incentives and door prizes.

CHID Accession Number • HE94P1535

O

Program • Parenting Resource Center: Special Needs.

Contact • Lynch, MaryAnne.

Agency • Parenting Resource Center, P.O. Box 505, Austin, MN 55912. (507) 433-0692.

Program Dates • 1978-continuing.

Program Delivery • Worksites, homes, and the community.

Funding Source(s) • Mower County Department of Public Health, Public Health Nursing Division, and the United Way.

Primary Purpose • To provide parent education/intervention and child care resources and referrals for families of mentally or physically handicapped children residing in Mower County, Minnesota.

• Training programs, one-to-one education classes, support groups, information and referral, lending library, films and videos, toy lending library, advocacy, child care resource and referral, crisis nursery, parent aid, trained volunteers, monthly newsletter, and information on educational rights.

Methods Employed • One-to-one counseling and support groups.

Materials Used • Developed curricula, education videos, brochures, and teaching aids.

Health Topic(s) Addressed • Arthritis, cancer, diabetes, heart disease, high blood pressure, injuries, nutrition, pregnancy/prenatal care, smoking prevention, stress, substance abuse, and violence.

Geographic Area/Unit • Multi-county, county, rural, and family units.

Program Setting • Community-based agency and local health department.

Target Population • All families of mentally or physically handicapped infants, children, adolescents, and adults.

CHA Title • Parent advocate.

CHA Roles • Outreach, health promotion or health education, patient/client advocate, social support or counseling, and community advocate.

CHA Information • Peer workers are paid \$7 per hour and work an average of 80 hours per month. Inservice training is offered as needed by the program coordinator and certificates are given to the workers.

Number of CHAs • 1

Number of Clients Served • 40 to 50. in 12 Months

Methods for Recruiting • Educational programs, emotional support, and support groups.

Clients

Program • Partners in Parenting.

Contact • Simonson, Dee.

• Peanut Butter and Jelly Therapeutic Infant and Family Center, P.O. Box 1407, Bernalillo, NM 87004. (505) 867-2356.

Program Dates • September 1993-continuing.

Program Delivery • Schools, worksites, religious functions, homes, public health clinics, hospitals and medical clinics, and other areas in the community.

Funding Source(s) • Peanut Butter and Jelly Therapeutic Infant and Family Center.

Primary Purpose • To provide primary and secondary child abuse prevention services to all new parent families in the Greater Bernalillo, New Mexico area. The two existing service providers offer professional, therapeutic primary prevention services for families who are screened and deemed to need more intensive treatment services.

Services Offered • Providing primary child abuse prevention services to all new mothers in greater Bernalillo, providing in-home secondary prevention services for 1 year to those families deemed at-risk for parenting problems before abusive or dysfunctional patterns are allowed to develop, and facilitating positive family functioning rather than just preventing problems by offering on-going parent training and support groups for participants in the program.

Local community members are recruited and trained as lay home health advisors who visit new, at-risk mothers in the home during pregnancy and throughout the critical first year of their child's life. They provide parent education regarding fetal and infant-child development, involvement of family members and friends in child care and support of the mother, linkage of family members with other needed health and human services, and support group services to strengthen families by teaching communication skills and by focusing and enhancing the child/parent dyad.

Health Topic(s) Addressed • Family planning, injuries, nutrition, pregnancy and prenatal care, physical activity, adolescent sexual behavior, substance abuse, and child development.

Geographic Area/Unit • Rural, county, and family units.

Program Setting • Community-based agency.

Target Population •

Male and female Native Americans (Navajo and Pueblo Indians), Mexican Americans, and whites from infants to adults.

CHA Title • Home visitors.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocacy, patient/client treatment or services, social support or counseling. transportation assistance, and community advocacy.

CHA Information •

After 10 hours of training by a nurse or program coordinator, the CHA's work approximately 20 hours per month and receive a stipend. Each CHA also receives a minimum of 4 hours of training each month.

Number of CHAs • 5.

Number of Clients Served •

in 12 Months

100.

Evaluation Plan •

An evaluation plan is being developed.

Methods Used in • Recruiting CHAs

Word of mouth, flyers at laundromats and post offices, and Supplemental Food Program for Women, Infants, and Children (WIC) offices.

Methods Used in • Retaining CHAs

Word of mouth, flyers at laundromats and post offices, and WIC offices.

Methods for Recruiting • Clients

Being present at WIC offices, flyers at community gathering places, and referral forms.

Methods for Retaining • Clients

Being present at WIC offices, flyers at community gathering places, and referral forms.

CHID Accession Number •

HE94P1565

Program • Perth Amboy Community Partnership for Youth.

Contact • Done-Perez, Iris.

• University of Medicine and Dentistry of New Jersey, Robert Wood Johnson Medical School, 436 Amboy Avenue, Perth Amboy, New Jersey, NJ 08861. (908) 826-9292.

Program Dates • July 1989-continuing.

Program Delivery • Homes, community.

Funding Source(s) • Office for Substance Abuse Prevention.

Primary Purpose • To educate and train community volunteers as peer educators to provide culturally relevant health education to their families and friends in informal, family settings, and to reduce health-related problems in the Latino community.

Services Offered • Tutoring, peer tutoring, peer leadership, recreational programs, parent workshops, parent groups, parenting skills instruction, inservice teacher training, counseling for parents and children, community newsletters, family cultural and recreational programs, parent tutoring programs, and parent support groups.

Materials Used • Adapted curriculum and developed training guide, both in Spanish.

Health Topic(s) Addressed • Adolescent sexual behavior, and substance abuse.

Geographic Area/Unit • Family units.

Program Setting • Community-based agency, and medical school.

Target Population • Male and female Hispanic-American children, adolescents, and adults.

CHA Title • Health promoters.

CHA Roles • Outreach, and health promotion/health education.

• Peer workers work an average of 20 to 25 hours per month. The program provides compensation and awards certificates. Each peer worker receives 20 hours of initial training, and 2 hours of inservice training per month. No credits are awarded. Health educators/parent organizers train peer workers.

Number of CHAs • 12.

Number of Clients Served • 60. in 12 Months

Methods Used in • Door-to-door, health education presentations, and church outreach. Recruiting CHAs

Methods Used in • Informal presentations, training provided by bilingual, bicultural staff, and awarding incentives and other forms of recognition.

Methods for Recruiting • Making services accessible, providing bilingual staff, and charging no fees.

Clients

Methods for Retaining • Services offered, bilingual staff, and sensitivity to client needs.

Clients

Program • Resource Mothers.

Contact • Pierce, Carolyn D.

Agency • People Incorporated of Southwest Virginia, 988 West Main Street, Abingdon, VA 24201. (703) 628-9188.

Program Dates • July 1993-continuing.

Program Delivery • Schools, worksites, and homes.

Funding Source(s) • People Incorporated of Southwest Virginia, by the United Way, and by various other sources.

Primary Purpose • To increase parents' level of social competency and their ability to be self sufficient.

Services Offered • Social services, transportation, case management, support, parent training, and nutrition counseling.

Methods Employed • Weekly home visits with a structured lesson plan including social service delivery, health education demonstration, group peer training for participants, and transportation in rural areas.

Materials Used • A developed curriculum, videos, and training guides.

Health Topic(s) Addressed • Nutrition, pregnancy/prenatal care, adolescent sexual behavior, smoking prevention, and violence.

Geographic Area/Unit • Rural, county, multi-county, and family units.

Program Setting • Community-based agency.

Target Population • African-American, white, and Mexican-American infants, adolescents, and adults.

CHA Title • Home Visitors.

CHA Roles • Outreach, health promotion or health education, patient/client advocate, social support or counseling, transportation provider, and community advocate.

CHA Information •

The workers receive \$5.30 per hour, 28 cents per mile traveled using their cars, and \$75 per month toward health costs. Each home visitor receives 40-60 hours of initial training and 9 hours of inservice training per month. Nurses, health educators, and the program coordinator conduct peer health worker training.

Number of CHAs • 9

Number of Clients Served • in 12 Months

• 98.

Evaluation Plan •

A 32-item questionnaire designed to assess the Head Start component services the client received.

Methods Used in • Recruiting CHAs

• Advertisements, peer group referral, and Head Start parents.

Methods Used in • Retaining CHAs

• Recognition, setting a standard of quality for the program, and training.

Methods for Recruiting • Clients

• Department of Social Services Medicaid workers, public school guidance counselors, and peer group contacts.

Methods for Retaining • Clients

Weekly contact, involving family in visits, and biweekly peer group sessions.

CHID Accession Number • HE9

HE94P1595

Program • Resource Parents.

Contact • Cooper, Arthur P.

Agency • Leon County Department of Health, 2965 Municipal Way, Tallahassee, FL 32304. (904) 487-3146.

Program Dates • February 1991-continuing.

Program Delivery • Homes and public health clinics.

Funding Source(s) • State and local government agencies.

Primary Purpose • To improve maternal and child health outcomes, enhance parenting and child development, support family integrity, and provide assistance to high risk pregnant women, infants, and children through peer workers who are parents themselves.

Services Offered • Development of service plans for each family, home visits, childbirth education, parenting and family planning information, car seat safety, and coordination of and referral to services.

Methods Employed • Supervision by the project coordinator with frequent joint visits, case reviews, staff meetings, inservice training, and observations.

Materials Used • Videos and books.

Health Topic(s) Addressed • Family planning, pregnancy and prenatal care, sexual behavior, smoking prevention, substance abuse, violence, and infant care.

Geographic Area/Unit • County, family units, and communities.

Program Setting • Local health department.

Target Population • African-American and white adolescents, adults, and their infants.

CHA Title • Community health workers.

CHA Roles • Health education, client advocacy, and social support.

• Peer workers average 40 hours worked per month. They receive a salary. Peer workers receive 80 hours of initial training and 8 hours per month of inservice training. The program issues certificates.

Number of CHAs • 6.

Number of Clients Served • 100. in 12 Months

Evaluation Plan • Yes.

Methods Used in • Through Project Independence, word of mouth, and churches. Recruiting CHAs

Methods Used in • Inservice education, paired visits, and availability of a supervisor.

Retaining CHAs

Methods for Recruiting • Interviews.

Clients

Methods for Retaining • Having a stable group of peer workers and having their needs met.

Clients

036

Program • Bilingual Health Education Aide Program.

Contact • Yulo-Agmata, Herita.

Agency • Hawaii Department of Health, Health Promotion and Education Branch, P.O. Box 3378, Honolulu, HI 96801. (808) 832-5685.

Program Dates • July 1973-continuing.

Program Delivery • Homes, public health clinics, the community, hospitals/medical clinics, immigrant centers, and state agencies.

Funding Source(s) • Hawaii Department of Health.

Primary Purpose • To teach newly arriving immigrants about prevention and make them aware of available health services.

• Home visits, referral to social services, health education, and followup. The program utilizes bilingual aides who are immigrants themselves and who know the culture, language, and effective vays to approach immigrant families.

Materials Used • Purchased resource directory, and a training guide (adapted).

Arthritis, cancer, cholesterol screening and education, communicable diseases, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, injury prevention, nutrition, pregnancy and prenatal care, physical activity, adolescent sexual behavior, smoking prevention, stroke, substance abuse, urinary incontinence, and violence.

Geographic Area/Unit • Rural, county, state, urban, and family units, and communities.

Program Setting • State health department.

Target Population • Male and female Chinese, Filipino, Vietnamese, and Pacific Islanders of all ages.

CHA Title • Bilingual health education aides.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, patient/client treatment or services, referral to social services, social support or health counseling, and community advocate.

CHA Information •

• Each CHA receives 24 hours of initial training, 1-2 hours of inservice training each month, \$9.27 per hour, and health insurance, vacation leave, and sick leave. The outreach workers organize themselves according to ethnicity and areas where they work. The workers meet together to share information.

Number of CHAs • 11.

Number of Clients Served • in 12 Months

8,238.

Evaluation Plan •

• Evaluation has shown that volunteers have performed followup on cases involving immigrants who fail to return for treatment or additional testing for tuberculosis. Over 85 percent of the immigrants contacted have been screened and tested.

Methods Used in • Recruiting CHAs

Ethnic media (radio, television, newspaper); word of mouth; and interagency council.

Methods Used in • Retaining CHAs

• Flexibility of the program to meet the needs of the community, their working with the grassroots population, and understanding their cultures.

Methods for Recruiting • Clients

Referrals from programs, agencies (health and social), and community
organizations; dissemination of information to immigrants and refugees in the
community; and announcements on ethnic radio and television stations, and
newspapers.

Methods for Retaining • Clients

Assisting them in their pressing problems first, providing health and health related services, and providing followup services, advocacy, and home visits.

Program • Caring for Diversity: Strategies for Care Professionals.

Contact • Kavanagh, Kathryn H.

Agency • University of Maryland, Baltimore, 621 Parson Hall, 622 West Lombard Street, Baltimore, MD 21201. (410) 706-7726.

Program Dates • October 1993-continuing.

Program Delivery • Schools and worksites.

Funding Source(s) • University of Maryland, Baltimore.

Primary Purpose • To increase sensitivity, knowledge, and skills related to diversity at the individual, agency, and community level.

Services Offered • Formal sessions via workshops and classroom formats with agency and subagency consultation over an extended period of time.

Methods Employed • Participatory ownership, community and personal empowerment, and diversity management based on specific behavioral outcomes.

Materials Used • Materials used include a self-developed curriculum and videotapes.

Health Topic(s) Addressed • Cultural, ethnic, gender, and other categorical diversity as they impact health care delivery.

Geographic Area/Unit • Rural, county, urban, state, and communities.

Program Setting • Schools.

Target Population • All adult ethnic populations, both male and female.

CHA Title • Team members.

CHA Roles • Health education, patient advocacy, and community advocacy services.

• Team members work an average of 10 hours per month; they are not paid. They receive 16 hours of initial training, and receive continuing education credit.

Number of CHAs • 4.

- Number of Clients Served 120. in 12 Months
 - Evaluation Plan Yes.
 - Methods Used in Knowledge of their skills, positive reinforcement, and support.

 Recruiting CHAs
 - Methods Used in Co-leadership strategies, their own commitment to diversity promotion, and program activities.
 - Methods for Recruiting The area health education center.

 Clients
 - Methods for Retaining Relevant information, a balance between abstract and how-to information, and through participatory activities.

Program • Community Health Advocacy Program.

Contact • Latham, Paige.

Agency • East Carolina University, Center for Health Services Research and Development, Physicians Quadrangle, Building N, Greenville, NC 27858. (919) 816-2785.

Program Dates • 1983-continuing.

Program Delivery • Worksites, the community, and public health clinics.

Funding Source(s) • East Carolina University, North Carolina State University Cooperative Extension Service, and various other sources.

Primary Purpose • To improve the health and well being of people living in areas of medical need in North Carolina.

Services Offered • Information on health issues and local resources which enables the peer workers to promote better health in their communities.

Methods Employed

• The Community Health Advocacy Program (CHAP) identifies lay community leaders and trains them to function as volunteer health advocates. These advocates help local people learn how to obtain maximum benefit from existing health and social services and to promote disease prevention and better health practices.

Materials Used • Brochures and training manuals.

Health Topic(s) Addressed •

 Aging, anatomy and physiology, cancer, consumer guide to medicines and health services, dental health, diabetes, environmental health, family planning, first aid and CPR, health promotion and disease prevention, heart diseases, maternal and child health, mental health, nutrition, osteoporosis, pregnancy/prenatal care, physical activity, sexually transmitted diseases, and substance abuse.

Geographic Area/Unit • Rural, county, and communities.

Program Setting • Community-based agency and local health department.

Target Population • Male and female African-American and white children and adults.

CHA Title • Community health advocates.

CHA Roles • Health promotion or health education and community advocate.

CHA Information • All community health advocates receive between 36-39 hours of initial training and receive a program certificate at the completion of their training.

Program • Community Health Partnership.

Contact • Scott, Mark.

Agency • Codman Square Health Center, 637 Washington Street, Dorchester, MA 02124. (617) 825-9660, ext. 193.

Program Dates • September 1991-continuing.

Program Delivery • Community, and door-to-door neighborhood association.

Funding Source(s) • W.K. Kellogg Foundation.

Primary Purpose • To increase health by building the community, to reach the uninsured and include them in health care and in the community, and to assist in organizing neighborhood efforts and provide information and referral services.

Services Offered • Door-to-door outreach and involvement in community efforts.

Materials Used • Curriculum from the Community Health Education Center.

Health Topic(s) Addressed • Alzheimer's disease, breast and cervical cancer, high blood pressure, HIV/AIDS, pregnancy and prenatal care, and violence.

Geographic Area/Unit • Urban communities.

Program Setting • Community-based agency and health center.

Target Population • African-Americans, whites, Cubans, Central Americans, Puerto Ricans, and South Americans in all age groups.

CHA Title • Community health workers.

CHA Roles • Outreach, health education, client advocacy, and community advocacy services.

• Community health workers average 8 hours of work per month. They receive a salary of ten dollars per hour and receive health insurance. They receive 40 hours of initial training as well as 5 hours of inservice training monthly.

Number of CHAs • 5.

Number of Clients Served • 1,500 in 12 Months

Evaluation Plan • Yes.

Methods Used in • Payment of a good salary, word of mouth, and through a volunteer base.

Recruiting CHAs

Methods Used in • Good training, diverse work, and increasing responsibility.

Retaining CHAs

Methods for Recruiting • Door-to-door and through participation in neighborhood associations.

Clients

Methods for Retaining • Followup phone calls and visits, building relationships, and remaining active in associations.

Program • Community Health Representative (CHR) Program.

Contact • Solomon, Nicky.

• US Department of Health and Human Services, Public Health Service, Indian Health Service, Parklawn Building, Room 5A-41, 5600 Fishers Lane, Rockville, MD 20857. (301) 443-2500.

Program Dates • July 1968-continuing.

Program Delivery • Schools, worksites, religious organizations, homes, public health clinics, hospitals, and American Indian and Alaska Native facilities.

Funding Source(s) • Indian Health Service.

Primary Purpose • To provide quality outreach health care services and health promotion services to American Indians and Alaska Natives within their communities through the use of well-trained CHR's.

Services Offered • Health education, case screening, case management, monitoring patients, emergency care, patient care, homemaker services, transportation services, translation services, and other services.

Materials Used • CHR Basic Training Course, the CHR Refresher Course, and various other curricula developed by the CHR program.

Health Topic(s) Addressed • A comprehensive range of health topics including environmental health.

Geographic Area/Unit • American Indian reservations, Alaska Native villages.

Program Setting • Federal contractual agreements with federally recognized Indian and Alaska Native corporations.

Target Population • Alaskan Natives, Native Americans, and most federally recognized tribes in Alaska. All age groups are served.

CHA Title • Community health representatives.

CHA Roles • Full range of services, including interpretive and translation services.

CHA Information • Peer workers work approximately 48 hours per month. They receive an annual salary of approximately \$14,000. Initial training consists of 120 hours. Inservice training is 40 hours per year.

Number of CHAs • 1550.

Number of Clients Served • 3.7 million unduplicated client services.
in 12 Months

Evaluation Plan • Yes.

Methods Used in • Through a tribal contractor who recruits and hires local people.

Recruiting CHAs

Methods Used in • CHR's living and working among their own people in their own communities.

Retaining CHAs

Methods for Recruiting • Recruitment of clients is automatic since the need for services is so great.

Clients

Methods for Retaining • CHR's are caring individuals who often integrate traditional helping concepts into their daily tasks when working with their people.

Program • Community Health Representative Program.

Contact • Charge, Letha L.

• US Department of Health and Human Services, Public Health Service, Indian Health Service, Federal Building, 115 4th Avenue, SE., Aberdeen, SD 57401. (605) 226-7584.

Program Dates • 1968-continuing.

Program Delivery • Schools, worksites, homes, the community, public health clinics, hospitals/medical clinics, and community health representative (CHR) offices.

Funding Source(s) • Indian Health Service.

Primary Purpose

To raise the health status and wellbeing of the population of American Indians residing on reservations; to assure Indian people access to high quality, comprehensive health services appropriate to their needs; to assist Indian tribes to develop the capacity to staff and manage health programs and provide them with the opportunity to assume operational authority for Indian Health Service (IHS) programs serving their communities; and to act as the Indian people's advocate in health-related matters and help them gain access to other federal, state, and local programs to which they are entitled.

Services Offered • Social service, advocacy, and transportation.

Materials Used • Developed curricula and videos.

Alzheimer's disease, arthritis, cancer, cholesterol screening and education, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, injuries, maternal-child health, nutrition, osteoporosis, pregnancy/prenatal care, physical activity, adolescent sexual behavior, smoking prevention,

stroke, substance abuse, urinary incontinence, and violence.

Geographic Area/Unit • Rural, county, multi-county and state units, Indian reservations, and communities.

Program Setting • Community-based agency.

Target Population • Male and female Native American tribal members of all ages.

CHA Title • Community health representatives.

CHA Roles • Outreach, health promotion or health education, patient/client advocate, patient/client treatment or services, social support or counseling, transportation provider, and community advocate.

• CHR's receive 40 hours of initial training and 8 hours of inservice training every month. Each CHR works an average of 160 hours each month and earns approximately \$12,000 per year. Credits and certificates are awarded to the volunteers.

Number of CHAs • 227.

Number of Clients Served • 651,421. in 12 Months

Evaluation Plan • Yes. Program evaluations are performed by the tribe members.

Methods Used in • Advertising and word of mouth. Recruiting CHAs

Methods Used in • On-the-job training, classroom instruction, and inservice training.

Retaining CHAs

Methods for Recruiting • Clients are members of the community.

Clients

Program • Community Health Representative.

Contact • Davis, Lucille.

Agency • Alaska Area Native Health Service (AANHS), 250 Gambell Street, Anchorage, AK 99501. (907) 257-1643.

Program Dates • 1969-continuing.

Program Delivery • Schools, homes, hospitals and clinics, and other community locations.

Funding Source(s) • Indian Health Service.

Primary Purpose • The Alaskan Community Health Representative (CHR) program delivers to American Indians and Alaska Natives health services not otherwise available.

• Measurement of vital signs; general health assessment and referral; verbal and written reporting; communication including translation; investigation; transportation of patients, supplies, and medications; teamwork; and advocacy.

Methods Employed • Methods employed vary greatly depending on the individual program.

Materials Used • Curriculum materials are from the Indian Health Service.

Health Topic(s) Addressed • A comprehensive range of health topics.

Geographic Area/Unit • Rural and urban areas in Alaska.

Program Setting • Community-based agency, local health department, and local health organizations.

Target Population • Alaskan Natives, Native Americans, and various tribes; both males and females in all age groups are served.

CHA Title • Community health representatives.

CHA Roles • Outreach, health education, risk assessment, client advocacy, patient services, social support, transportation, and community advocacy.

• CHR's work an average of 35 hours per month. They receive an hourly salary. Initial training consists of 120 hours; subsequent inservice training varies. The program issues credits and certificates. CHR's receive training from nurses, health educators, program coordinators, and professionals from all disciplines.

- Number of CHAs 112.
- Number of Clients Served The number of people served each year varies significantly.

 in 12 Months
 - Methods Used in Word of mouth, personal recruitment, and local advertising. Recruiting CHAs
 - Methods Used in Training, health benefits and retirement eligibility, and recognition.

 Retaining CHAs
 - Methods for Recruiting Clients are recruited in the same manner as the peer workers.

 Clients
 - Methods for Retaining Providing needed service, valuing time, and appreciating participation.

 Clients
- CHID Accession Number HE94P1509

Program • Community Health Representatives.

Contact • Swallow, Vivian.

Agency • Shoshone and Arapaho Tribes, P.O. Box 860, Fort Washington, WY 82514. (307) 332-9571.

Program Dates • 1968-continuing.

Program Delivery • Schools, worksites, homes, public health clinics, and other community locations.

Funding Source(s) • Indian Health Service.

Primary Purpose • To provide quality outreach health care services and health promotion services to American Indians and Alaska Natives within their communities through the use of well-trained community health representatives (CHR's).

Services Offered • Health education, case screening, case management, monitoring patients, emergency care, patient care, homemaker services, transportation services, translation services, and other services.

Materials Used • The program uses health education materials developed by the Indian Health Service.

Health Topic(s) Addressed • Arthritis, cancer, cholesterol education, diabetes, heart disease, high blood pressure, HIV/AIDS, injuries, nutrition, pregnancy and prenatal care, physical activity, adolescent sexual behavior, and stroke.

Geographic Area/Unit • Native Americans from Shoshone and Arapaho tribes. The program serves males and females in all age groups.

Program Setting • Community-based agency and the Indian Health Service.

Target Population • Male and female Native American (Shoshone and Arapaho) infants, children, adolescents, and adults.

CHA Title • Community health representatives.

CHA Roles • Outreach, health promotion and education, and transportation services.

CHA Information •

The average number of hours worked per month by CHR's is 160. Workers receive a salary and retirement benefits. CHR's receive 120 hours of initial training, and a small amount of inservice training. The program issues credits and certificates.

Number of CHAs • 21.

Number of Clients Served • in 12 Months

• 4,000.

Methods Used in • Recruiting CHAs

• Knowledge of regular employment, a salary, and an opportunity to grow and learn.

Methods Used in • Retaining CHAs

• Lack of other opportunities, isolation, and exciting projects.

Methods for Recruiting • Clients

Accommodating needs of the client, no cost to client, and accessible services.

Methods for Retaining • Clients

Need for services, the lack of alternative resources, and availability of services.

Program • Community Health Worker Program, c.o. Homeless Health Initiatives.

Contact • Horowitz, Sheilah.

Agency • New York City Department of Health, Bureau of Families With Special Needs, Homeless Health Initiative, 111 Livingston Street, Room 2022, Brooklyn, NY 11201. (718) 643-7337.

Program Dates • July 1993-continuing.

Program Delivery • Homeless shelters.

Funding Source(s) • New York Department of Health.

Primary Purpose • To assist homeless pregnant and parenting women and their families through advocacy, case management and followup when families are placed in permanent housing.

Services Offered • Referrals, outreach, case management, and other services as recommended by social work supervisors.

Health Topic(s) Addressed • Family planning, HIV/AIDS, nutrition, pregnancy and prenatal care, adolescent sexual behavior, smoking prevention, substance abuse, and other preventive health topics for children and families.

Geographic Area/Unit • All five urban counties of New York City.

Program Setting • Local health department.

Target Population • African-American, white, and Hispanic-American women in all age groups, as well as their children.

CHA Title • Community health workers.

CHA Roles • Outreach, health promotion and education, risk assessment, client advocacy, social support, and community advocacy.

• Community health workers average 35 hours of work per week; they receive compensation for their services. Initial training involves approximately 140 hours.

Number of CHAs • 5.

Number of Clients Served • 90 pregnant and 30 parenting women.
in 12 Months

Evaluation Plan • Yes.

Methods Used in • As required by civil service; the Community Health Worker position represents a promotion opportunity.

Methods Used in • A participatory supervisory style.

Retaining CHAs

Methods for Recruiting • Aggressive outreach, continuous followup, and referrals by public health nurses.

Methods for Retaining • Aggressive followup, achieving client goals, and maintaining non-threatening relationships.

Program • Concord Feminist Health Center.

Contact • Baum, Patti.

Agency • Concord Feminist Health Center, 38 South Main Street, Concord, NH 03301. (603) 225-2739.

Program Dates • 1974-continuing.

Program Delivery • Schools, worksites, clinics, and other locations in the community.

Funding Source(s) • Concord Feminist Health Center.

Primary Purpose • The Concord Feminist Health Center (CFHC) is a licensed, non-profit clinic devoted to women and their health care.

Services Offered • Routine gynecological care, contraceptive counseling and devices, infection diagnosis and treatment, pregnancy testing, counseling, and first trimester abortion services. Non-medical services include pregnancy options counseling, education to school and community organizations, a monthly lesbian discussion group, legislative lobbying, and referrals for health related concerns. In 1992, CFHC began to screen and treat men for sexually transmitted infections.

Materials Used • Brochures, videos, teaching aids. The Health Center also publishes a quarterly women's health journal.

Health Topic(s) Addressed • Breast cancer, family planning, HIV/AIDS, nutrition, and sexual behavior.

Geographic Area/Unit • Rural and urban multi-county and multi-state areas.

Program Setting • Non-profit women's health clinic.

Target Population • African-American and white men and women from adolescence through adulthood.

CHA Title • Healthworkers.

CHA Roles • Outreach, health education, risk assessment, client advocacy, and social support.

• Healthworkers average 160 hours worked per month. They are compensated at \$9.50 per hour and receive health insurance and retirement benefits. Health workers receive 240 hours of initial training followed by 8 hours of inservice training per month.

Number of CHAs • 12.

Number of Clients Served • 3,000. in 12 Months

Evaluation Plan • Yes.

Methods Used in • Employment advertising, word of mouth, and client services.

Recruiting CHAs

Methods Used in • Salary and benefits, nonhierarchical workplace structure, and regular education and discussion.

Methods for Recruiting • Phone book, word of mouth, and high return rate of clients.

Clients

Methods for Retaining • High quality of health care maintenance, low cost of services, and large range of office hours.

Program • Domestic Missions.

Contact • Tazelaar, Grace.

Agency • Luke Society, Inc., P.O. Box 349, Vicksburg, MS 39181. (601) 638-0377.

Program Dates • 1990-continuing.

Program Delivery • Religious organizational settings, homes, community settings, and hospital/medical clinics.

Funding Source(s) • Luke Society, Inc.

Primary Purpose • To provide religious guidance to low-income persons via lay health ministries that promote total personal health.

Services Offered • Consultation, training, and funding.

Methods Employed • Consultation and organizational/community development.

Materials Used • Spiritual training guides and health care videos.

Health Topic(s) Addressed • Diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, injuries, nutrition, pregnancy/prenatal care, physical activity, adolescent sexual behavior, stroke, substance abuse, and violence.

Geographic Area/Unit • Rural, county, urban, multi-county, multi-state, family units, and communities.

Program Setting • Community-based agency, hospital/medical clinic, and religious institution.

Target Population • Male and female Hispanic Americans, Asian Americans, African Americans, and whites of all ages.

CHA Title • Lay health advisors, lay home visitors, and big brothers.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, patient/client treatment or services, transportation provider, and community advocate.

CHA Information • The amount of training each community health advisor receives varies among programs.

Number of CHAs • 50.

- *Methods Used in* Recruiting through churches. *Recruiting CHAs*
- Methods Used in Recognition for services, continuing education credits, and certificates.

 Retaining CHAs
- Methods for Recruiting Contact with program participant and clinic clients, and community contacts.

 Clients

Program • Health Promotion Initiatives.

Contact • Sutherland, Mary.

Agency • Area Agency on Aging, 2639 North Monroe Street, Suite 145-B, Tallahassee, FL 32303. (904) 488-0055.

Program Dates • 1980-continuing.

Program Delivery • Schools, worksites, religious organizations, community, public health clinics, and hospitals/medical clinics.

Funding Source(s) • Center for Substance Abuse Prevention, and by the Florida Department of Elder Affairs.

Primary Purpose • Health Promotion Initiatives is a community-based program that funds several church health promotion projects in Florida. The projects include an evaluation plan for high risk youth, community-based senior citizen programs, church-based senior citizen programs, cardiovascular health promotion, and alcohol and other drug community partner programs. The projects were designed to develop a conference on the role of the church in drug prevention and education, and bring together various community systems with selected African-American systems in order to develop a community prevention plan.

Services Offered • Exchanges of news, social support, and resources via ministers and volunteers.

Materials Used • Manuals, activity books, and pamphlets that can be purchased.

Health Topic(s) Addressed • Arthritis, cancer, diabetes, heart disease, high blood pressure, nutrition, physical activity, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural.

Program Setting • Private non-profit organization.

Target Population • Male and female African Americans and whites of all ages.

CHA Title • Community organizers.

CHA Roles • Health promotion or health education, social support or counseling, and community advocate.

CHA Information • Each peer worker receives 10 hours of initial training and continuing training each month, \$8.60 per hour, and a certificate.

Number of CHAs • 8.

Evaluation Plan • The goals and objectives are evaluated biannually in conferences with church health leaders. Results of the yearly needs assessment data are used as measures in establishing new, specific program objectives, which influence program activities.

Methods Used in • Recruiting CHAs

Word of mouth.

Methods Used in • Retaining CHAs

Word of mouth.

Methods for Recruiting • Clients

• Word of mouth.

Methods for Retaining •

Word of mouth.

Clients

Program • Health Promotion/Disease Prevention for Elder Blacks: A Peer Counselor Training Program.

Contact • Luck, Melissa.

Agency • Morehouse School of Medicine, Department of Community Health and Preventive Medicine, 720 Westview Drive, SW., Atlanta, GA 30310. (404) 752-1855.

Program Dates • October 1989-continuing.

Program Delivery • Religious organizations and the community.

Funding Source(s) • Administration on Aging.

• Health Promotion/Disease Prevention for Elder Blacks: A Peer Counselor Training Program is a health promotion and disease prevention program that focuses on the special needs of Georgia's older African Americans. Special features of this program include its emphasis on attracting low-income older African-American adults, training of indigenous community older volunteers as peer counselors, and coordination of program activities with agencies and organizations already operating in the African-American community, particularly the informal support systems.

Services Offered • Information dissemination of culturally sensitive health education materials and a comprehensive training curriculum to train indigenous community leaders as health advocates and peer counselors in health promotion.

Materials Used • A developed health promotion curriculum, an instructor's manual, a peer counselor guidebook, and videos.

Health Topic(s) Addressed • Alzheimer's disease, arthritis, cancer, cholesterol education, diabetes, heart disease, high blood pressure, HIV/AIDS, injuries, nutrition, osteoporosis, physical activity, sexual behavior, smoking prevention, and stroke.

Geographic Area/Unit • Rural, multi-county, and communities.

Program Setting • Community-based agency and religious institution.

Target Population • Elderly low-income African-American adults.

CHA Title • Health promotion peer counselors.

CHA Roles • Outreach, health promotion or health education, and community advocate.

CHA Information • Each health promotion peer counselor receives 24 hours of initial training by nurses, physicians, pharmacists, social workers, and dietitians; and works an average of 8 hours per month.

Number of CHAs • 47. in 12 Months

Number of Clients Served • 500. in 12 Months

Program • HealthC.A.R.E. (Christian Advocacy, Referral, and Education in Health).

Contact • Schout, Debra.

Agency • Christians for Health, Inc., 134 East Barney, Muskegon Heights, MI 49444. (616) 737-1491.

Program Dates • 1988-continuing.

Program Delivery • Schools, religious organizations, community centers and organizations, and city parks.

Funding Source(s) • Region 14 Area Agency on Aging, and by the City of Muskegon.

Primary Purpose
 HealthC.A.R.E. (Christian Advocacy, Referral, and Education in Health) is a program that provides materials for training Christians to become lay health advisors to provide Christian advocacy, referral, and education in order to improve the health status of low income and minority persons in Muskegon and Muskegon Heights, Michigan.

Services Offered • Sharing accurate health information, advocacy, early referrals for professional intervention, and promoting healthy life style choices among their peers.

Methods Employed
 Identifying, training, and supporting Christian HealthC.A.R.E. workers and volunteers who actively seek those in need and advocate for them by educating, counseling, and making referrals. The program uses a grass roots community development approach in addressing the health needs of the city, following a community health worker model.

Materials Used • A developed curriculum, teaching aids, and educational videos.

Arthritis, cancer, cholesterol screening and education, chronic obstructive pulmonary disease, diabetes, family planning, maternal and child health, high blood pressure, HIV/AIDS, nutrition, osteoporosis, pregnancy and prenatal care, physical activity, adolescent sexual behavior, smoking prevention, stroke, substance abuse, and holistic wellness.

Geographic Area/Unit • Rural, urban, family units, and communities.

Program Setting • Community-based agency and religious institution.

Target Population • Male and female Native Americans, African Americans, and whites of all ages.

CHA Title • HealthCARE workers.

• Each community health worker receives 30 hours of initial training and up to 1 hour of inservice training each month by nurses, health educators, and the program coordinator. Certificates are issued to the workers but credits are not.

Number of CHAs • 17.

Number of Clients Served • 500. in 12 Months

Evaluation Plan • Evaluated each year based on the progress made toward meeting annual goals.

Methods Used in • Contacting pastors and church nurses guilds, word of mouth from other community health workers who have been trained, involvement/presentations at other community agencies, and partial reimbursement for transportation.

Methods Used in • Coordinator helps workers obtain their goals, involvement in/recognition of special events, and group support among workers.

Methods for Recruiting
One-on-one visits from HealthCARE workers, presentations of workers in churches, and followup of other agency referrals.

Methods for Retaining • Follow through with verbal commitments, regular monthly contact, and blood Clients pressure checks.

Program • Hispanic/Multicultural Services.

Contact • Harrington, Barbara.

Agency • St. Joseph's Hispanic Services, 5665 Peachtree-Dunwoody Road, Atlanta, GA 30342. (404) 851-7778.

Program Dates • 1985-continuing.

Program Delivery • Schools, worksites, religious organizations, homes, community, migrant centers or camps, public health clinics, and hospitals/medical clinics.

Funding Source(s) • St. Joseph's Mercy Foundation.

Primary Purpose • Hispanic/Multicultural Services is a hospital-based and outreach program in Atlanta which collaborates with existing public and private health care providers to increase Hispanic access and understanding of available community health and medical services.

Services Offered • Hospital services; mobile clinics; prenatal programs; Medicaid access; disabilities outreach; sexually transmitted diseases and HIV/AIDS education; abused women support; counseling for women, adolescents, and children with HIV; education concerning domestic violence that results from alcohol or drug abuse; and parenting skills education.

Materials Used • Educational videos, brochures, posters, resources directory, developed teaching aids, books, and curriculums in both Spanish and English.

Health Topic(s) Addressed • HIV/AIDS, injuries, pregnancy/prenatal care, adolescent sexual behavior, and substance abuse.

Geographic Area/Unit • Rural, county, multi-county, family units, and communities.

Program Setting • Community-based agency and hospital or medical clinic.

Target Population • Hispanic-American ethnic groups: Cubans, Mexican Americans, Central Americans, Puerto Ricans, and South Americans. The program serves both male and female populations at all age levels from infancy to adulthood.

CHA Title • Health promoters.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, and transportation provider.

CHA Information • Each peer health worker receives 40 hours of initial training and 2 to 4 hours of continuing training each month.

Number of CHAs • 10.

Number of Clients Served • 3,500. in 12 Months

Methods Used in • Advertising in a community, contacts in the community, and individual referral.

Methods Used in • Salary of \$8 per hour, health insurance benefits, incorporation into the programs, and opportunities for development and advancement.

Methods for Recruiting • Outreach, flyers, and radio announcements.

Clients

Methods for Retaining • Comprehensive services, followup on home visits, and support groups.

Clients

Program • La Escuela de Promotores/Casa en Casa Program.

Contact • Beita, Oscar; Hernandez, Cassandra.

Agency • La Clinica de la Raza, Inc., 1515 Fruitvale Avenue, Oakland, CA 94601. (510) 535-4130.

Program Dates • January 1990-continuing.

Program Delivery • Homes, schools, religious organizations, community, hospitals/medical clinics, and community-based organizations.

Funding Source(s) • California Wellness Foundation, and the California Department of Health Services.

Primary Purpose • To teach participants and at the same time allow them to practice their abilities which will help them promote health within their communities and develop trust among themselves as health promoters so they can develop their own home-to-home group programs.

Services Offered • Training and counseling.

Methods Employed • Group discussions, teaching guides, and planning activities.

Materials Used • Purchased teaching aid and training guides, printed in both Spanish and English.

Health Topic(s) Addressed • Cholesterol screening/education, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, nutrition, physical activity, smoking prevention, and stroke.

Geographic Area/Unit • Urban, family units, and communities.

Program Setting • Community-based agency, hospital or medical clinic, and community-based health education program.

Target Population • Mexican-American and Central-American adolescents and adults.

CHA Title • Health promoters.

CHA Roles • Health promotion or health education, social support or counseling, and community advocate.

CHA Information • Each of the peer workers receives 24 hours of initial training, \$8 per hour when the program has funding, and 4 hours of inservice training per month by health educators.

Number of CHAs • 24.

Number of Clients Served • 10. in 12 Months

Methods Used in • Word of mouth, health education presentations, and school meetings.

Recruiting CHAs

Methods Used in • Program response to need identified by promoters; promoters' participation in planning, implementation, and decision-making; and promoters living in the same community.

Methods for Recruiting • Working with local peer educators, the program clinic is based in the community, and the service is free.

Methods for Retaining • Involving them in the program as health promoters; organizing participatory, educational, fun activities; and respecting and celebrating clients' traditional holidays.

Program • Luces de Salud (Lights of Health).

Contact • Nichols, Donna C.

Agency • Texas Department of Health, 1100 West 49th Street, Austin, TX 78756. (512) 458-7534.

Program Dates • September 1990-continuing.

Program Delivery • Worksites, religious organizations, homes, community, and public health clinics.

Funding Source(s) • National Cancer Institute.

Primary Purpose • To provide low cost breast and cervical cancer screening information and referral; to develop, implement, and evaluate a cervical and breast cancer awareness and prevention program in close coordination with national, state, regional, and local health care agencies and organizations.

Methods Employed
 Television, radio, and print co-productions featuring local role models who discuss their experiences with cancer screening and who encourage other women to participate in screening services, such as mammography and Papanicolaou (Pap) smears.

Materials Used • Newsletter printed in both Spanish and English, developed by the program.

Health Topic(s) Addressed • Breast and cervical cancer.

Geographic Area/Unit • Urban.

Program Setting • Local health department.

Target Population • Mexican-American women over the age of 40.

CHA Title • Community volunteers.

CHA Roles • Outreach, health promotion/education.

CHA Information • Recruits receive 1 hour of training before going into the community and are rewarded with certificates of appreciation. Training is conducted by nurses, health educators, and the program coordinator.

Number of CHAs • 200.

- Number of Clients Served 7,000 women. in 12 Months
 - Evaluation Plan The evaluation plan consists of a pre- and post-intervention survey.
 - Methods Used in Presentations, other volunteers, and public service announcements on television and radio.
 - Methods Used in One-to-one contact when newsletters are distributed, reminding volunteers of the importance of their role, and encouragement.
 - Methods for Recruiting Volunteer's distribution of newsletters, volunteer's words of encouragement, and group presentations to women in public clinic waiting rooms.
 - Methods for Retaining Reminder post cards, calls, and followup on women who miss appointments.

 Clients

Program • Multicultural Services.

Contact • Ebberween, Angela.

Agency • St. Joseph's Hospital, Multicultural Services, 5665 Peachtree-Dunwoody Road, Atlanta, GA 30342. (404) 851-5278.

Program Dates • January 1993-continuing.

Program Delivery • Schools, homes, and other community locations.

Funding Source(s) • Woodruff Foundation, and the St. Joseph's Mercy Foundation.

Primary Purpose • To help underserved ethnic communities overcome cultural and economic barriers that limit access to health care.

Services Offered • Free access to a children's clinic; interpretation and translation services; health education; assistance in applying for Medicaid, Medicare, and Social Security; and help in locating other available low cost or free health services.

Methods Employed • Outreach, health presentations, client advocacy, health promotion, and social support and counseling.

Materials Used • Teaching guide, teaching aids, and a resource directory.

Health Topic(s) Addressed • Family planning, high blood pressure, HIV/AIDS, nutrition, pregnancy and prenatal care, and substance abuse.

Geographic Area/Unit • Multi-county family units and communities.

Program Setting • Hospital or medical clinic, religious institution, and St. Joseph's Health System.

Target Population • African Americans, whites, Hispanic Americans, Cambodians, Koreans, and Vietnamese in all age groups.

CHA Title • Health promoters.

CHA Roles • Outreach, health promotion, client advocacy, social support, and community advocacy.

CHA Information •

Health promoters work an average of 20 hours per month. They receive a salary of \$7.25 per hour and benefits. Health promoters receive approximately 30 hours of initial training and 3 to 4 hours per month of inservice training.

Number of CHAs • 8

Methods Used in • Recruiting CHAs

Community contacts.

Methods Used in • Retaining CHAs

Maintaining a support network, and by providing additional training beyond the initial orientation.

Methods for Recruiting • Clients

Door-to-door contact, promotional flyers, and word of mouth.

Methods for Retaining • Clients

Followup home visits, followup telephone calls, and the provision of support services.

Program • Native American Health Outreach.

Contact • Gordon, Beverly.

Agency • Coconino County Department of Public Health, P.O. Box 1625, Page, AZ 86040. (602) 645-2283.

Program Dates • October 1992-continuing.

Program Delivery • Schools, homes, community, public health clinics, and hospitals/medical clinics.

Funding Source(s) • US Department of Health and Human Services.

Primary Purpose • Native American Health Outreach (NAHO) is a program designed to assist Native Americans who are economically, socially, and financially disadvantaged in the Lake Powell Medical Center (Arizona) service area through the use of outreach workers and an outreach counselor.

Services Offered • NAHO provides families with information on health care and health education, assists families in identifying their needs, provides help in getting services, and functions as a liaison between families and services.

Methods Employed
 Identify families in need of assistance; provide general support, preventive health care education, prenatal education, parenting skills, basic counseling, and supportive care; assist families with application procedures as needed; and develop a Family Plan to provide families a tool through which they can empower themselves in the future.

Materials Used • Developed curricula and training manuals.

Health Topic(s) Addressed
 Alzheimer's disease, arthritis, cancer, cholesterol screening/education, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, injuries, nutrition, osteoporosis, pregnancy/prenatal care, physical activity, adolescent sexual behavior, smoking prevention, stroke, substance abuse, urinary incontinence, and violence.

Geographic Area/Unit • Rural, county, family units, and communities.

Program Setting • Local health department and hospital or medical clinic.

Target Population • All Native American tribes, focusing primarily on the Navajo, at all age levels.

CHA Title • Outreach workers.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, social support or counseling, transportation provider, and community advocate.

CHA Information • Each outreach worker receives approximately 100 hours of training covering specific health issues and each month receives between 8 to 16 hours of additional inservice training. Three outreach workers and one outreach counselor are presently employed at \$7.56 per hour each. Training is conducted by nurses, health educators, the program coordinator, and other counselors.

Number of CHAs •

Number of Clients Served • 260 families. in 12 Months

Evaluation Plan • Product evaluation assessed four categories: Laryngotracheitis; simple pneumonia and pleurisy; bronchitis and asthma; and esophagitis, gastroenteritis, and other digestive disorders. Process evaluation judged the effectiveness, acceptability, and continuity of the program planning and measured the effectiveness of the community outreach workers and prevention counselor.

Recruiting CHAs

Methods Used in • Word of mouth and newspaper advertising.

Retaining CHAs

Methods Used in • Flexibility in work schedules, continued education, the knowledge that they are helping people, and sick leave and vacation time.

Methods for Recruiting • Clients

Referrals from reservation clinics, referrals from community agencies, and word of mouth.

Clients

Methods for Retaining • Using a family-centered approach and continued followup and communication.

Program • Oneida/Herkimer Community Health Worker Program.

Contact • Webb, Diane.

Agency • Oneida County Department of Health, 800 Park Avenue, Utica, NY 13501. (315) 798-5836.

Program Dates • October 1988-continuing.

Program Delivery • Schools, homes, public health clinics, Women, Infants, and Children (WIC) sites, and other community locations.

Funding Source(s) • New York Department of Health.

Primary Purpose • To increase access to services and remove barriers to care, primarily focusing on pregnant women and their children in target areas of high infant mortality.

Services Offered • Assessment, home visits, case management, health education, referral and advocacy with other agencies, and transportation.

Methods Employed • Health education, advocacy, and client empowerment.

Materials Used • Teaching aids (Clearing the Air, Baby on the Way Basics, Baby Talk, Growing up Drug Free, 100 Questions and Answers-AIDS, For Women Only); videotapes (Mary's Choice, Before it's Too Late-Vaccinate, You and Your Baby); brochures; and resource directories.

Health Topic(s) Addressed • Breast cancer, family planning, HIV/AIDS, nutrition, pregnancy and prenatal care, sexual behavior, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural and urban multi-county family units and communities.

Program Setting • Local health department.

Target Population • African Americans, whites, Mexican Americans, Central Americans, Puerto Ricans, and South Americans in all age groups.

CHA Title • Community health workers.

CHA Roles • Outreach, health education, risk assessment, client advocacy, social support, transportation, and community advocacy.

CHA Information • Peer workers average 140 hours worked per month. They receive an average salary of \$9.00 per hour and full benefits. Peer workers receive 104 hours of initial training and an average of 6 hours of inservice training per month. The program issues certificates.

Number of CHAs •

Number of Clients Served • in 12 Months

757.

Evaluation Plan •

The program's evaluation plan includes a detailed statistical report that gathers data on pregnancy cases and pregnancy outcomes.

Methods Used in • Recruiting CHAs

Newspaper advertising. Since the program functions in a high unemployment area, there are many applications for each position.

Methods Used in • Retaining CHAs

Good salary and benefits, importance of the social contribution of the work, and flexibility in scheduling and use of individual abilities.

Methods for Recruiting • Clients

Referrals from public health nurses and social workers, referrals from other clients, and outreach at health fairs, schools, WIC sites, and on the street.

Methods for Retaining • Clients

Individualized planning to meet client's expressed needs, reliability of the workers, and respect for clients.

Program • Peer Education Program.

Contact • McElroy, Edralyn T.

Agency • Hawaii Department of Health, 741-A Sunset Avenue, Honolulu, HI 96816. (808) 733-9049.

Program Dates • 1988-continuing.

Program Delivery • Schools.

Funding Source(s) • Hawaii Department of Health.

Primary Purpose • To improve the health awareness of adolescents, increase communication within families, and implement indigenous health practices such as ho'oponopono (a group technique). The program also focuses on parent support.

Methods Employed • This program uses student volunteers to meet its objectives. The student volunteers provide daily contact at the school site, on-going training of peer educators, school credit for participation, and a multidimensional approach to peer assistance: Education, one-to-one help, and group support.

Health Topic(s) Addressed • Adolescent suicide, adolescent sexual behavior, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • State of Hawaii.

Program Setting • State health department and schools.

Target Population • Children, adolescents, and adults from all racial and ethnic groups.

CHA Title • Peer educators.

CHA Roles • Health promotion, health education, social support, and counseling.

CHA Information • Each Peer Educator receives credits and approximately 20-30 hours of initial training by nurses, health educators, and the program coordinator.

Number of CHAs • 600.

Number of Clients Served • 15,000. in 12 Months

CHA Information •

Participants completed questionnaires concerning satisfaction and knowledge gained. To assess the program's strength and weaknesses, peer coordinators discussed program planning and development, direct services, and content.

Methods Used in • Recruiting CHAs

• Teacher/counselor recommendations, personal interview, and class registration.

Program • Vida Manos Y Salud Project.

Contact • Rael, Roberta M.

Agency • Centro de Amistad, Inc., 8202 Avenida del Yaqui, Guadalupe, AZ 85283. (602) 839-2926.

Program Dates • 1991-continuing.

Program Delivery • Homes, agencies, and other community locations.

Funding Source(s) • Centro de Amistad.

Primary Purpose • To educate and empower individuals, neighborhoods, and the community of Guadalupe, Arizona, in the areas of primary prevention and early intervention.

Services Offered • Immunization clinics once a month, prenatal advocacy, and diabetes screening and education.

Methods Employed • Establishment of linkages with health care service providers and other organizations, training in leadership and community organization skills for peer workers, and development of neighborhood health councils.

Materials Used • A variety of purchased and donated videos, and developed training materials.

Health Topic(s) Addressed • Diabetes, pregnancy and prenatal care, and immunization.

Geographic Area/Unit • Rural, county, and State family units.

Program Setting • Community-based agency and behavioral health agency.

Target Population • African Americans, whites, Mexican Americans, and Native Americans of all ages.

CHA Title • Promotoras.

CHA Roles • Outreach, health promotion, risk assessment, client advocacy, transportation, and community advocacy.

• Promotoras work an average of 160 hours per month. They receive an annual salary of \$16,000 plus health benefits. They receive 160 hours of initial training and 4 to 8 hours per month of inservice training. The program does not issue credits or certificates.

- Number of CHAs 6.
 - Evaluation Plan Yes.
- Methods Used in Word of mouth and flyers.

 Recruiting CHAs
- Methods Used in Incentives and a competitive salary.

 Retaining CHAs
- Methods for Recruiting Credibility and services.

 Clients
- Methods for Retaining Development of relationships.

 Clients

Program • West Virginia Black Lung Clinics Program.

Contact • Haden, David; Snyder, Karen.

Agency • West Virginia Department of Health and Human Resources, 1411 Virginia Street, E., Charleston, WV 25301. (304) 558-4007.

Program Dates • 1978-continuing.

Program Delivery • Schools, worksites, religious organizations, homes, public health clinics, hospitals, shopping malls, and other community locations.

Funding Source(s) • Federal Black Lung Clinics Program, and the West Virginia Black Lung Clinics Program.

Primary Purpose • To stimulate and encourage local public and private agencies to improve the health status of coal workers and to increase coordination with other programs to assist the coal worker population.

Services Offered • Casefinding and outreach, medical services, patient and family education, and followup.

Methods Employed • Each project site addressing its community based upon its individual needs.

Materials Used • Manuals developed by the program and videos and brochures developed by individual project sites.

• Lung disease, arthritis, cancer, cholesterol screening or education, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, injuries, nutrition, osteoporosis, pregnancy and prenatal care, physical activity, sexual behavior, smoking prevention, stroke, substance abuse, urinary incontinence,

and violence.

Geographic Area/Unit • Rural and urban areas.

Program Setting • Community-based agency, hospital or medical clinic.

Target Population • All persons with occupational lung disease and their families.

CHA Title • Benefits counselors or outreach workers.

CHA Roles • Outreach, health promotion, risk assessment, social support, and transportation.

CHA Information •

Peer workers average 160 hours worked per month. They receive an annual salary of \$15,425. They also receive health care and retirement benefits. Peer workers receive 6 weeks of orientation. The program issues credits and certificates.

Number of CHAs • 9.

Number of Clients Served •

17,206.

in 12 Months

Evaluation Plan • Yes.

Methods Used in • Recruiting CHAs

• Advertising, interviews, and word of mouth.

Recruiing CIIIIs

Methods Used in • Retaining CHAs

Harmonious work relations, financial recognition, and professional growth.

Methods for Recruiting • Clients

Home visits, worksite awareness, community health fairs, and community access areas such as shopping malls.

Methods for Retaining • Clients

Satisfaction with care, continuity of care, and reasonable program costs.

CHID Accession Number •

• HE94P1557

Injury/Violence

059

Program • Big Stone Lake Area Parent Mentor Program.

Contact • Dragseth, Marge.

Agency • Ortonville Area Health Service, 750 Eastvold, Ortonville, MN 56278. (612) 839-2502.

Program Dates • May 1990-continuing.

Program Delivery • Homes, in the community, and at hospitals or clinics.

Funding Source(s) • Ortonville Area Health Services, Minnesota Children's Health Grant.

Primary Purpose • The Big Stone Lake Area Parent Mentor Program uses volunteers to build relationships with parents of children 0 to 5 years old in order to provide them with psychological support, parenting skills, and education.

Materials Used • The curriculum is a combination of two mentor programs.

Health Topic(s) Addressed • Family planning, nutrition, pregnancy and prenatal care, and prevention of child abuse.

Geographic Area/Unit • Rural, county, family units, and communities.

Program Setting • Community-based agency, and hospital or medical clinic.

Target Population • Male and female white and Native American infants, adolescents, and adults.

CHA Title • Parent mentors.

CHA Roles • Outreach, health education, and social support.

CHA Information • Parent mentors work approximately 10 hours per month and receive no compensation for their services. They receive 12 hours of initial training.

Number of CHAs • 6.

Number of Clients Served • 8 in 12 Months

Evaluation Plan • Program evaluation forms are completed by volunteers after training, and client evaluation forms are completed by clients after completing the program.

Methods Used in • Radio, newspaper, and community contacts. Recruiting CHAs

Methods Used in • Retaining CHAs

Regular contact through mail or telephone, mentor meetings, and praise and recognition.

Methods for Recruiting • Clients

• Referrals from organizations, contact initiated by the program coordinator, and brochures and other information sent to communities.

Methods for Retaining • Clients

• Regular contact from mentors and the program coordinator, caring and understanding mentors, and a sincere desire to help the clients.

Program • Child Abuse and Neglect Prevention.

Contact • Walker, Kimberly A.

• Children's Trust Fund of Oregon, 500 Summer Street, NE., Salem, OR 97310. (503) 378-5798.

Program Dates • July 1987-continuing.

Program Delivery • Schools, homes, community, migrant centers or camps, public health clinics, and hospitals/medical clinics.

Funding Source(s) • Children's Trust Fund of Oregon.

Primary Purpose • To help strengthen and support families in order to enhance the well-being of Oregon's children by promoting state prevention and education programs designed to decrease the incidence of child abuse and neglect; and award monies from the Trust Fund in an equitable matter for the express purpose of establishing, maintaining, or expanding primary or secondary prevention programs.

Services Offered • Prenatal and perinatal support programs providing health care, in-home support and coordination of community resources; education for parents and pre-parents; and crisis and relief child care.

Methods Employed • Providing grants to prevention programs.

Health Topic(s) Addressed • Family planning, pregnancy/prenatal care, adolescent sexual behavior, substance abuse, and child abuse prevention.

Geographic Area/Unit • Rural, county, state, urban, and family units, and communities.

Program Setting • Community-based agency, local health department, hospital or medical clinic, and schools.

Male and female Vietnamese, African Americans, whites, Native Americans, and Mexican Americans of all ages; and high risk families, including parents who are teenagers, economically stressed, drug or alcohol abusing, isolated, mentally ill, or previous abuse victims.

Number of CHAs • 785.

Number of Clients Served • in 12 Months

• 1,186 families.

Evaluation Plan •

The Children's Trust Fund of Oregon is evaluated on its effectiveness to reduce the incidence of child maltreatment. Approximately 96 percent of the clients served by the program show no reports of abuse or neglect of their children. There were six evaluation objectives: Describe the program and participants, report on outcomes, report on the well-being of children whose families were involved in the program, report on client outcomes of individual and family functioning, describe the services delivered, and work with Children's Trust Fund grantees on identifying other dimensions of family function which show improvement. Comprehensive teen programs, professional home visiting, and volunteer home visiting programs report an average of about 25 percent of their clients to be at highest risk, and another 25 percent to be at moderate risk. Results suggest that the outcomes for children are better for the comprehensive interagency teen programs than for the home visiting program.

Program • Family Support Program.

Contact • Gordon, Barbara.

Agency • Children Can Soar, Inc., 309 North 23rd Street, Birmingham, AL 35203. (205) 251-8814.

Program Dates • September 1992-continuing.

Program Delivery • Public health clinics, the community, and social services agencies.

Funding Source(s) • Children's Trust Fund of Alabama, the Alabama Governor's Office of Drug Abuse Policy, the United Way of Central Alabama, and the Junior League of Birmingham.

Primary Purpose • Family Support Program helps low income families develop skills and access resources to provide for their children's health and well-being.

Services Offered • Programs are brought directly to families while they wait for services at public health and social service agencies.

Methods Employed • Educators engage families in activities and discussions which teach practical skills for resolving conflict, improving communication, boosting self-esteem, fostering positive discipline, and seeking community resources.

Materials Used • A curriculum specifically designed for the needs of clients. Short educational videos with scenarios of real life situations act as a spring board for discussion, while activities and handouts introduce practical skills accessible to people of all educational levels.

Health Topic(s) Addressed • Injuries, pregnancy and prenatal care, substance abuse, violence, and child abuse.

Geographic Area/Unit • Urban, county, and family units.

Program Setting • Community-based agency.

Target Population • African Americans and whites in all age groups.

CHA Title • Family support educators.

CHA Roles • Health education, client advocacy, and social support.

Injury/Violence

CHA Information •

Peer workers work an average of 24 hours per month. They receive \$250 for conducting 10 sessions. Peer workers receive 6 hours or more of initial training and 2 to 3 hours per month of inservice training.

Number of CHAs • 18.

Number of Clients Served • in 12 Months

18,000.

Evaluation Plan •

• Adult participants evaluate the program. Parents report on evaluation cards what information they find most interesting or useful.

Methods Used in • Recruiting CHAs

• Word of mouth, a child abuse task force, and the University of Alabama at Birmingham.

Methods Used in • Retaining CHAs

• Allowing workers to develop programs and teaching methods that work best for them; by supporting them with materials, information and assistance; and by paying them for their work.

Methods for Recruiting • Clients

• Clients are recruited during the time families wait for service at public health and social agencies.

Methods for Retaining • Clients

Retention of clients is not applicable since programs are designed for one time participation.

Program • From Birth to Five.

Contact • Fischhoff, Andi.

Agency • Family Resources, 1437 Denniston Avenue, Pittsburgh, PA 15217. (412) 682-8001.

Program Dates • July 1990-continuing.

Program Delivery • Schools, homes, and community settings.

Funding Source(s) • United Way and various local sources.

Primary Purpose • From Birth to Five is a primary prevention program affiliated with Family Resources, a United Way agency, that seeks to prevent and treat child abuse by strengthening families and communities through organizing support groups for parents of infants and small children, including teenage parents.

Services Offered • Peer counseling, parent education, information/referral advocacy, home visiting, and volunteer opportunities.

Methods Employed • Immunizations, well-child examinations, and postpartum examinations.

Health Topic(s) Addressed • Child abuse, family planning, nutrition, pregnancy/prenatal care, parenting, adolescent sexual behavior, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Families and communities.

Program Setting • Community-based agency.

Target Population • Male and female African Americans and whites of all ages.

CHA Title • Home visitors.

CHA Roles • Outreach, health promotion or education, risk assessment, patient/client advocate, patient/client treatment or services, social support or counseling, transportation provider, and community advocate.

• Each community health advisor (CHA) receives 12 to 15 hours of initial training and 10 hours of inservice, continuing training every month, conducted by nurses, health educators, and the program coordinator; and \$8-10 per hour.

Number of CHAs • 4.

Number of Clients Served • 110. in 12 Months

Methods Used in • Recruiting CHAs

Recruiting from among the natural leaders in the parenting groups, networking
with other service providers who may recommend individuals, and recruiting
volunteers recommended by staff.

Methods Used in • Retaining CHAs

 Visiting new parent families in their homes; providing practical and emotional assistance as needed; and providing competitive salaries, supervision/mentoring, and inservice training experiences.

Methods for Recruiting • Clients

Hospital referrals, contracts with the Health Department Healthy Start
initiatives, and volunteers visiting new mothers in the hospital to inform them
of the program.

Methods for Retaining • Clients

 Assistance with household duties such as cooking, laundry, and cleaning; provision of material aids (e.g., used baby equipment, diapers, formula); and respectful attitude.

Program • Parent Befriender.

Contact • Argyros, Pat.

• St. Paul Area Council of Churches, 1671 Summit Avenue, St. Paul, MN 55105. (612) 646-8805.

Program Dates • 1987-continuing.

Program Delivery • Homes.

Funding Source(s) • St. Paul Area Council of Churches.

Primary Purpose • To prevent child abuse and neglect through provision of social support in the lives of extremely stressed families.

Services Offered • Home visits, social support, role modeling, and linkage to community services.

Methods Employed • A team approach with public health nurses as case managers.

Materials Used • A developed curriculum, a videotape (Friends from California P.H.), and developed brochures.

Health Topic(s) Addressed • Injuries, nutrition, pregnancy and prenatal care, sexual behavior, and violence.

Geographic Area/Unit • Urban and county areas.

Program Setting • Local health department and religious institution.

Target Population • African-American, white, and Asian-American infants, adolescents, and adults.

CHA Title • Parent befrienders.

CHA Roles • Outreach, client advocacy, social support, and transportation.

• Parent befrienders work an average of 8 hours per month. They receive an expense reimbursement for mileage. Peer workers receive 15 hours of initial training and 2 hours of inservice training per month. The program does not issue credits or certificates.

Number of CHAs • 25.

Number of Clients Served • 40. in 12 Months

Evaluation Plan • Yes.

Methods Used in • Reputation, media, and peer recruitment. Recruiting CHAs

Methods Used in • Ongoing support, recognition, and personal availability. Retaining CHAs

Methods for Recruiting • Public Health Department.

Clients

Methods for Retaining • Prevention of child abuse and empowerment.

Clients

Program • Senior Crime and Violence Prevention Project.

Contact • Kyle, James E.

• Massachusetts Department of Public Health, Family and Community Health, 150 Tremont Street, Boston, MA 02111. (617) 727-2013, ext. 371.

Program Dates • September 1989-continuing.

Program Delivery • Schools, religious organizations, homes, community, and senior centers.

Funding Source(s) • Massachusetts Department of Public Health.

Primary Purpose • Senior Crime and Violence Prevention Project is an outreach program in Boston, Massachusetts developed to provide elderly persons with technical assistance and educational materials concerning violence and crime prevention.

Services Offered • Group meetings, information dissemination, workshops, and technical assistance.

Materials Used • A developed curriculum, brochures, training guides, and videos in Spanish and English.

Health Topic(s) Addressed • Injuries, physical activity, and violence.

Geographic Area/Unit • State, urban, and communities.

Program Setting • Community-based agency, state health department, and religious institution.

Target Population • Puerto Ricans, African Americans and whites of all ages.

CHA Title • Crime watch group captains.

CHA Roles • Outreach, social support or counseling, and community advocate.

• Each volunteer peer worker receives approximately 1 hour of initial training and 1 hour of inservice training per month by health educators. They work variable hours.

Number of CHAs • 45.

Number of Clients Served • 1,200. in 12 Months

Injury/Violence

Methods Used in • Recruiting CHAs

• Notices and distribution of educational material and serving refreshments at discussions.

Methods Used in • Retaining CHAs

- Orientation and discussion, setting short- and long-term goals, and workshops and technical assistance.
- Methods for Recruiting Clients
- Telephone calls and personal visits, social events, and participation in regular group meetings.
- Methods for Retaining Clients
- Business and social meetings combined, conferences, and technical assistance.

Maternal and Child Health

065

Program • Baby Amigo Program.

Contact • Metzler, Jennifer L.

• University of New Mexico, School of Medicine, Maternity and Infant Care Program, New Mexico Prenatal Care Network, Albuquerque, NM 87131. (505) 277-0229.

Program Dates • July 1991-continuing.

Program Delivery • Schools, homes, worksites, the community, hospitals/medical clinics, and religious organizations.

Funding Source(s) • US West Foundation, the Honeywell Foundation, and the University of New Mexico School of Medicine, Maternity and Infant Care Program.

Primary Purpose • The Baby Amigo Program, a project of the New Mexico Prenatal Care Network, encourages early and continuous prenatal care for pregnant women.

• The program offers a healthy start through improved birth outcomes as a result of earlier and continuous prenatal care, early access to the health care delivery system, quality health care, social and emotional support from clinic staff and peers, access to other community services through referral networks, and material support to facilitate client self-care and the practice of positive health behaviors. Baby Amigo recruits women not currently accessing care into six Maternity and Infant Care Program clinics located throughout Albuquerque.

Materials Used • Senior volunteers prepare materials on a weekly basis. The program uses Reaching Out, a training manual for community health workers, and a brochure containing maternity and infant care program information.

Health Topic(s) Addressed • Pregnancy/prenatal care, and client recruitment/community outreach.

Geographic Area/Unit • County, urban, family units, community, state (technical assistance only), and multi-county (technical assistance only).

Program Setting • Community-based agency, and hospital or medical clinic.

Target Population • Female adolescent and adult Vietnamese, Hispanic Americans, African-Americans, whites, and male infants.

CHA Title • Clinical Assistants or Health Specialists.

CHA Roles • Outreach, patient advocates, clinical assistants, and community advocates.

CHA Information • Peer workers average 16 to 18 hours of outreach work each month. They receive 2 to 4 hours of training each month, and receive compensation for their services. They are trained by a program coordinator, community development specialist, certified nurse midwife, substance abuse counselor, and community outreach workers.

Number of CHAs • 4.

Evaluation Plan • An evaluation plan for the program is in the development stage after recent program expansion and modification.

Methods Used in • It is too soon to evaluate the best methods for recruitment of peer workers.

Recruiting CHAs

Methods Used in • Involving the workers in the planning process, and by having a full time program coordinator.

Program • Baby Buddies.

Contact • Rosenblatt, Eileen S.

*Agency • Healthy Mothers-Healthy Babies Coalition of Broward County, Inc., P.O. Box 030313, Fort Lauderdale, FL 33303. (305) 765-0550.

Program Dates • May 1991-continuing.

Program Delivery • Schools, homes, public health clinics, the community, and hospital/medical clinics.

Funding Source(s) • Broward County, and the Sun Sentinel.

Primary Purpose • To assist low income pregnant women in maintaining healthy pregnancies through prenatal care and support services of a caring friend.

• Assisting women in obtaining early and continued prenatal care; providing assistance with accessing public programs; providing education in encouraging healthy behaviors; using caring friends to provide support, advice, and advocacy; providing transportation when feasible; and providing assistance as a labor coach when needed by the client.

Methods Employed • One-on-one contact through home visits and phone contacts.

Materials Used • Baby Buddies manual, a maternal and infant resource directory, and a book called What to Expect When You're Expecting.

Health Topic(s) Addressed • Family planning, HIV/AIDS, nutrition, pregnancy and prenatal care, sexual behavior, smoking prevention, and substance abuse.

Geographic Area/Unit • Broward County, Florida.

Program Setting • Community-based agency.

Target Population • African-American, Hispanic-American, and white female infants, adolescents, and adults.

CHA Title • Baby buddies.

CHA Roles • Outreach, health education, client advocacy, social support, transportation, and community advocacy.

CHA Information • Baby Buddies work an average of 4 to 10 hours per month; they receive compensation for their services.

Number of CHAs • 18.

Number of Clients Served • 60. in 12 Months

Evaluation Plan • Program evaluation includes keeping records of client contacts and noting positive outcome indicators such as decrease in number of low birth weight babies, reduction in number of preventable birth defects, and decrease in number of premature births.

Methods Used in • Resource fairs, community contacts and other referrals. Recruiting CHAs

Methods Used in • Personal phone contact, educational updates, and volunteer recognition events.

Retaining CHAs

Methods for Recruiting • Clinic referrals, word of mouth, and community and agency referral.

Clients

Methods for Retaining • In-home visits, phone contact, and the availability of labor coaches.

Clients

Program • Breastfeeding Peer Counselors.

Contact • Donahue, Beverly.

Agency • Nevada State Women, Infants, and Children (WIC) Program, 505 East King Street, Room 205, Carson City, NV 89710. (702) 687-4797.

Program Dates • February 1993-continuing.

Program Delivery • Public health clinics.

Funding Source(s) • US Department of Agriculture, Women, Infants, and Children (WIC) Program.

Primary Purpose • To increase breastfeeding initiation and duration among WIC clients.

Services Offered • Prenatal and postnatal breastfeeding promotion and support and encouragement for routine cases. The program also offers referral to lactation specialists for special problems.

Methods Employed • The program offers group classes, one-on-one sessions, and telephone consultation.

Health Topic(s) Addressed • Breastfeeding.

Geographic Area/Unit • Urban.

Program Setting • Community-based agency, local health department, state health department.

Target Population • Infants and mothers of any age who are African American, white, or Mexican American.

CHA Title • Breastfeeding peer counselors.

CHA Roles • Social support and counseling for the mothers.

CHA Information • The counselors work an average of 38 hours per month. They are paid \$7.00 per hour. Initial training consists of 20 hours; workers subsequently receive 2 to 4 hours of additional training per month.

Number of CHAs • 8.

Evaluation Plan • Program evaluation includes computer graphs of average number of cans of infant formula distributed per infant and breastfeeding rates.

Methods Used in • Recruiting CHAs

Advertisements in WIC clinics and newspapers, and careful interviewing procedures.

Methods Used in • Retaining CHAs

• Clear expectations, definite limits, and feedback when needed.

Methods for Recruiting Clients

Methods for Recruiting • Referral, clinic appearances, and word of mouth.

Program • Chaves County Maternal Child Health Referral.

Contact • Organ, Debbie.

Agency • New Mexico Department of Health, 200 East Chisum, Roswell, NM 88201. (505) 624-6164.

Program Dates • February 1993-continuing.

Program Delivery • Schools, homes, public health clinics, and within the community.

Funding Source(s) • New Mexico State Maternal Child Health County Act.

Primary Purpose • To provide education and services for pregnant women and for parents of children under the age of two.

Services Offered • Transportation, one-on-one education classes, emotional support, and coordination with churches for food and clothing.

Methods Employed • Lay health advisors from the same culture as the program clients.

Materials Used • The program uses a variety of teaching aids in both English and Spanish.

Health Topic(s) Addressed • Family planning, nutrition, pregnancy and prenatal care, and substance abuse.

Geographic Area/Unit • Rural.

Program Setting • Community-based agency, local health department, and schools.

Target Population • White and Mexican-American women and their infants.

CHA Title • Lay health advisors.

CHA Roles • Outreach, health education, client advocacy, and transportation.

• Lay health advisors work an average of 40 hours per month; they are compensated at \$6.80 per hour and receive medical, dental, and disability insurance, as well as vacation and sick leave. The advisors receive one and one half hours of inservice training per month from nurses. The program issues credits.

Number of CHAs • 2.

Number of Clients Served • 200. in 12 Months

Evaluation Plan • The program evaluates the health advisors; an employee evaluation report is available.

Methods Used in • Newspapers, word of mouth, and through other employees. Recruiting CHAs

Methods Used in • Good working relationships, good communication, and job satisfaction.

Retaining CHAs

Methods for Recruiting • Referral from pregnancy clinics, by word of mouth, and by program advertising.

Methods for Retaining • Excellent care, and followup at various intervals.

Clients

Program • Community Health Worker Program (CHWP).

Contact • Thornton, Linda.

Agency • New York Department of Health, Division of Family Health, Corning Tower, Room 890, Empire State Plaza, Albany, NY 12237. (518) 474-6968.

Program Dates • 1988-continuing.

Program Delivery • Homes, community, hospitals/medical clinics.

Funding Source(s) • New York Department of Health, and Medicaid.

Primary Purpose • To assist New York's pregnant and parenting women and their families in accessing needed health and support services. The program's goals are to reduce rates of low birth weight and infant mortality and to optimize the health status of indigent families. The primary objectives are to encourage underserved families to utilize primary care, nutritional and social services, and, as appropriate, alcohol, substance abuse, and HIV prevention, treatment, and rehabilitation services.

Services Offered • Indigenous workers provide home visiting as a prime service modality.

Materials Used • A developed curriculum and a developed resource directory which can be photocopied.

Health Topic(s) Addressed •

• Family planning, HIV/AIDS, injuries, nutrition, pregnancy and prenatal care, sexual behavior (adolescent), smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural, urban and family units, and communities.

Program Setting • Community-based agency, and local health department.

Target Population • Women who are at greatest risk of not accessing prenatal and infant care, women not reached by the traditional health care system, and women who may not be reached by other outreach strategies.

CHA Title • Community health worker.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, social support or counseling, transportation provider, and community advocate.

CHA Information •

Each peer worker receives 120 hours of initial training by health educators, nurses, and community service providers. Peer workers work an average of 150 hours per month and earn \$15,000 to \$20,000 per year.

Number of CHAs • 110.

Number of Clients Served • in 12 Months

• 4,000.

Methods Used in • Recruiting CHAs

• Word of mouth contact with other community agencies and publicity in local ethnic publications and gathering places.

Methods Used in • Retaining CHAs

• Core and inservice training, good communication between state and local agencies, adequate salaries and health insurance coverage, and frequent debriefing and conference sessions.

Methods for Recruiting • Clients

• Community outreach in target area, close contact with other community agencies, and public education/participation in community activities.

Methods for Retaining • Clients

 Empathic and supportive attitude of Community Health Worker; advocacy; home visitation; and client involvement in needs assessment and plan development.

Program • Community Health Worker Program.

Contact • Martin, Deborah.

Agency • Monroe County Department of Health, 111 West Fall Road, Caller 632, Rochester, NY 14692. (716) 274-6985.

Program Dates • September 1988-continuing.

Program Delivery • Schools, homes, hospitals and clinics, jails, and other community locations.

Funding Source(s) • New York Department of Health, and the Monroe County Department of Health.

Primary Purpose • To promote healthy pregnancy outcomes.

Services Offered • Basic health education, assistance in removing barriers to receiving ongoing, comprehensive prenatal care; in-home supportive and informational counseling; linkage and referral to needed medical, social, and community services based on assessed needs; and bus tokens for needed appointments.

Methods Employed • Home visits and other assistance.

Materials Used • The program uses a wide variety of materials including a curriculum from the New York State Department of Health, videotapes, brochures, and teaching aids.

Health Topic(s) Addressed • Cervical cancer, family planning, HIV/AIDS, pregnancy and prenatal care, sex behavior, smoking prevention, substance abuse, and domestic violence.

Geographic Area/Unit • Rural and urban areas, family units, counties, and communities.

Program Setting • Community-based agency, local health department, and hospital or medical clinic.

Target Population • African-American, white, Chinese, Japanese, Native American, and Hispanic American males and females of all ages.

CHA Title • Community health workers.

CHA Roles • Outreach, health promotion or health education, risk assessment, client advocacy, social support, community advocacy, and bus tokens.

CHA Information •

Community health workers work an average of 35 hours per week and are compensated for their services. Workers also receive health insurance, union membership, paid holidays, and mileage reimbursement.

Number of CHAs • 8.

Number of Clients Served •

in 12 Months

• 400 families.

Methods Used in • Recruiting CHAs

• Using the employment office of Monroe County, posting positions on bulletin boards, and word of mouth.

Methods Used in • Retaining CHAs

Job satisfaction, an excellent benefits package, and salary.

Methods for Recruiting • Clients

• Referrals from health care providers, liaisons with health centers, and the use of brochures.

Methods for Retaining • Clients

Positive relationships, clear assessment of client needs, and a focus on the whole family.

CHID Accession Number • HI

• HE94P1513

Program • Community Health Worker Program.

Contact • DiManno, Margaret.

Agency • Albany County Department of Health, 175 Green Street, Albany, NY 12202. (518) 447-4612.

Program Dates • June 1966-continuing.

Program Delivery • Schools, religious organizations, homes, public health clinics, hospitals, soup kitchens, WIC offices, street corners, and health fairs.

Funding Source(s) • New York Department of Health.

Primary Purpose • To enroll low-income pregnant women, infants, and children in continuous and comprehensive health care; assist clients in identifying and overcoming barriers to services; provide support; and encourage clients to enroll in substance abuse and domestic violence programs.

Methods Employed • Health teaching is provided when needed. CHWs distribute health information in the home through the use of videos and literature.

Materials Used • An educational curriculum, videotapes, brochures, teaching guides, teaching aids, and a resource directory.

Health Topic(s) Addressed • Breast and cervical cancer, family planning, high blood pressure, HIV/AIDS, injuries, nutrition, pregnancy and prenatal care, smoking prevention, substance abuse, domestic violence, and pediatric care including lead poisoning prevention and immunizations.

Geographic Area/Unit • Rural and urban areas.

Program Setting • Local health department.

Target Population • Males and females of all ages who are African American, white, or Hispanic American.

CHA Title • Community health workers or health guides.

CHA Roles • Outreach, health education and promotion, risk assessment, client advocacy, social support, transportation, and community advocacy.

CHA Information •

The average number of hours worked per month is 140 hours. Workers receive a salary of \$8.18 per hour plus benefits. Initial training consists of 42 hours, followed by 7 to 10 hours per month of inservice training.

Number of CHAs •

Number of Clients Served • in 12 Months

Evaluation Plan • Yes.

Methods Used in • Recruiting CHAs

Referrals from community lay persons, from community agencies, and from community health workers.

Methods Used in • Retaining CHAs

Stress management training and fringe benefits.

Methods for Recruiting • Clients

Door-to-door or street outreach, referrals from relatives or friends, and referrals from health care providers.

Methods for Retaining • Clients

Strong agency advocacy, incentives, and flexibility in schedule.

Program • Expanded Promotion of Breastfeeding (EPB).

Contact • O'Gara, Chloe.

Agency • Wellstart International, 3333 K Street, NW., Suite no. 101, Washington, DC 20007. (202) 298-7979.

Program Dates • October 1991-continuing.

Program Delivery • Worksites, public health clinics, hospitals, and other community locations.

Funding Source(s) • US Agency for International Development.

Primary Purpose • To improve breastfeeding practices.

Services Offered • Training of trainers, social marketing, outreach, and policy development.

Methods Employed • Assessment, qualitative research, policy workshops, and community-based support for lactating women.

Materials Used • Some materials used by the program are in Spanish.

Health Topic(s) Addressed • Nutrition and breastfeeding.

Geographic Area/Unit • Rural and urban areas at the national level.

Program Setting • Community-based agency, local health department, and hospital or medical clinic.

Target Population • Central American, South American, and Francophone African adult women and their infants.

CHA Title • Consejeras.

CHA Roles • Outreach, health education, patient services, social support, and community advocacy.

CHA Information • Peer workers average 7 hours worked per month. They receive compensation as well as transportation and food. Peer workers receive 20 hours of initial training followed by 2 hours per month of inservice training.

Number of CHAs • 60.

Number of Clients Served • 3,000. in 12 Months

> Primary health care meetings, community meetings, and breastfeeding support Methods Used in • Recruiting CHAs groups.

Methods Used in • Retaining CHAs

Enrichment education and through receiving assistance in developing income generating activities.

Clients

Methods for Recruiting • Regular health center meetings and word of mouth.

Program • Family Intervention Project.

Contact • Lancaster, Jo.

Agency • Peanut Butter and Jelly Therapeutic Infant and Family Center, P.O. Box 1407, Bernalillo, NM 87004. (505) 867-2356.

Program Dates • July 1993-continuing.

Program Delivery • Schools, worksites, religious functions, homes, public health clinics, hospitals and medical clinics, and other areas in the community.

Funding Source(s) • Peanut Butter and Jelly Therapeutic Infant and Family Center.

Primary Purpose • To provide early childhood information to new mothers and in-home intensive early intervention for parents at risk as determined by the Family Stress Checklist.

Services Offered • Outreach to 100 families and intensive case management services to 25 families; intervention and family support services, educational services to new mothers; and in-home intervention service for one year to those families deemed at risk for parenting problems before abusive or dysfunctional patterns are allowed to develop.

Health Topic(s) Addressed • Family planning, injuries, nutrition, pregnancy and prenatal care, physical activity, adolescent sexual behavior, substance abuse, and child development.

Geographic Area/Unit • Rural, county, and family units.

Program Setting • Community-based agency.

Target Population • Male and female Native Americans (Navajo and Pueblo Indians), Mexican Americans, and whites from infants to adults.

CHA Title • Health advisors.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocacy, patient/client treatment or services, social support or counseling, transportation assistance, and community advocacy.

CHA Information •

After receiving 10 hours of training by a nurse or program coordinator, the community health advisors (CHA's) work approximately 20 hours per month and receive a stipend. Each CHA also receives a minimum of 4 hours of training each month.

Number of CHAs • 5.

Number of Clients Served • in 12 Months

• 100.

Evaluation Plan • An evaluation plan is being developed.

Methods Used in • Word of mouth, flyers at laundromats and post offices, and Women, Infants, and Children (WIC) offices.

Recruiting CHAs

Methods Used in • Retaining CHAs

• Word of mouth, flyers at laundromats and post offices, and Women, Infant, Infant, and Children (WIC) offices.

Methods for Recruiting • Clients

• Being present at WIC offices, distributing flyers at community places, and issuing referral forms.

Methods for Retaining • Clients

 Being present at WIC offices, distributing flyers at community places, and issuing referral forms.

Program • First Steps Prenatal Program.

Contact • Abad, Ruth.

• Washington Department of Health, Parent-Child Health Services, P.O. Box 47880, Olympia, WA 98504. (206) 586-9052.

Program Dates • July 1989-continuing.

Program Delivery • Homes, migrant centers or camps, public health clinics, and hospitals and medical clinics.

Funding Source(s) • Washington Department of Health, and by the Washington Department of Social and Health Services.

Primary Purpose • To work with clients regarding appropriate use health care services, health education such as basic nutrition, avoidance of harmful substances during pregnancy, family planning, lactation education, or other health behaviors. To participate in planning and assisting the client in carrying out the plan of care.

Materials Used • Washington State Department of Health publications and brochures printed in Spanish, English, Russian, Korean, Cambodian, Laotian, Chinese, and Vietnamese.

Health Topic(s) Addressed • Family planning, nutrition, pregnancy and prenatal care, and smoking prevention.

Geographic Area/Unit • Rural, county, urban, multi-county, family units, and communities.

Program Setting • Community-based agency, local health department, and community health clinics.

Target Population • All adolescent and adult females and their infants.

CHA Title • Community health workers.

CHA Roles • Health promotion, health education, and client advocate.

CHA Information • Each peer worker receives initial training by nurses, health educators, and the program coordinator and receives 5 hours of inservice training yearly. Salaries vary with locality.

Number of CHAs • 25.

Methods Used in • Recruiting CHAs

• Good reputation of the program in the community, reasonable salary, and training and advancement opportunities.

Methods Used in • Retaining CHAs

Recognition of CHA's as equal members of the prenatal care team, job responsibilities in the area of education rather than doing clerical work for the agencies, training opportunities and reasonable salaries.

Methods for Recruiting • Clients

• Word of mouth, agency staff and services that are viewed as helpful, and one -to-one contact outreach with clients.

Methods for Retaining • Clients

 Scope of services available, rapport/trust developed between community and health workers and clients, and multiple choice of services and service agencies in most communities.

Program • First Steps.

Contact • Wright, Cindi.

• Florida Department of Health and Rehabilitative Services, District 8, First Steps, 215 South Francisco Street, P.O. Box 1505, Clewiston, FL 33440. (813) 983-2144.

Program Dates • July 1990-continuing.

Program Delivery • Homes and other locations in the community.

Funding Source(s) • Ounce of Prevention Fund of Florida.

Primary Purpose • To support parents in their efforts to give their children the best possible start in life.

Services Offered • Parenting, child development, maternal and child health, education and training, economic support, and mental health services.

Methods Employed • The program uses community resource parents who are indigenous to the group served and assistance of other project staff who link participants to services which meet immediate needs or develop an increased capacity for independence.

Health Topic(s) Addressed • Family planning, high blood pressure, HIV/AIDS, injuries, nutrition, pregnancy and prenatal care, physical activity, sexual behavior, smoking prevention, substance abuse, violence, birth defects, immunization, and child development.

Geographic Area/Unit • Small, rural communities and family units.

Program Setting • State social service agency - local district.

Target Population • African Americans, whites, and Hispanic Americans of all ages.

CHA Title • Community resource parents.

CHA Roles • Outreach, health education, client advocacy, social support, and transportation.

CHA Information •

Community Resource Parents work an average of 168 hours per month. They receive a salary of \$5.48 per hour and are reimbursed at \$0.20 per mile. Peer workers receive 120 hours of initial training plus 4 hours per month of inservice training.

Number of CHAs •

Number of Clients Served • in 12 Months

300.

Evaluation Plan • Yes.

Recruiting CHAs

Methods Used in • Word of mouth, local newspapers, and local radio job bulletins.

Methods Used in • Retaining CHAs

Frequent opportunities for communication and team building, training and workshops, and open door management.

Methods for Recruiting • Clients

Recommendations from other clients, referrals from schools and the health department, and offering services not available in the community.

Methods for Retaining • Clients

Fostering good relationships with resource parents and incentives such as coupons.

Program • Genesis.

Contact • Campanella-Green, Frank.

Agency • Boulder County Department of Health, 3450 Broadway, Boulder, CO 80304. (303) 441-1183.

Program Dates • January 1990-continuing.

Program Delivery • Schools, homes, public health clinics, hospitals, and other community locations.

Funding Source(s) • Boulder Board of County Commissions.

Primary Purpose • To interrupt the generationally transmitted cycles of teen parenting, low birthweight infants, substance abuse, and poverty that are typical risks for pregnant and parenting teens.

Services Offered • Outreach, assessment, action planning, counseling of teens and their families, case management, parent skills training, transportation assistance, reproductive counseling, and mentoring.

Methods Employed • Use of paraprofessional staff who have a history of having been teen parents themselves.

Materials Used • The program uses a wide variety of videos on child development, baby care, and other topics.

Health Topic(s) Addressed • Family planning, HIV/AIDS, injuries, nutrition, pregnancy and prenatal care, sexual behavior, smoking prevention, substance abuse, violence, and infant CPR.

Geographic Area/Unit • Rural communities and family units at the county level.

Program Setting • Local health department, and local mental health center.

Target Population • Mexican American adolescent women and their infants.

CHA Title • Resource parents.

CHA Roles • Outreach, health education, risk assessment, client advocacy, patient services, social support, transportation, and community advocacy.

CHA Information • Peer workers work an average of 173 hours per month. They are full time paid paraprofessionals. Paraprofessionals receive as much on the job training as needed.

Number of CHAs • 6.

Number of Clients Served • 600. in 12 Months

Evaluation Plan • Program evaluation includes baseline, 6 month, and 1 year client questionnaires.

Methods Used in • Word of mouth, newspaper advertisements, and program graduates.

Recruiting CHAs

Methods Used in • Providing them with emotional support, education, and bonuses.

Retaining CHAs

Methods for Recruiting • Clients are recruited by the health department, the Department of Social Services, and by word of mouth.

Methods for Retaining • By having their objectives met and by service availability on a drop-in basis.

Clients

Program • Healthy Families Santa Fe.

Contact • Owens, Carole.

Agency • Santa Fe County Health Center, 605 Letrado, Santa Fe, NM 87505. (505) 827-3794.

Program Dates • October 1991-continuing.

Program Delivery • Homes and public health clinics.

Funding Source(s) • Healthy Tomorrows Partnership for Children; New Mexico Department of Health, Public Health Division, Maternal and Child Health Bureau; and the City of Santa Fe Children and Youth Commission.

Primary Purpose • To prevent child abuse and neglect by strengthening the family unit physically, mentally, and socially.

Services Offered • Identification of family needs and provision of comprehensive home visitation to those who qualify and agree to participate in the program.

Methods Employed • Screening, risk assessment, and empowerment of parents.

Materials Used • An early childhood curriculum, Hawaii Healthy Start curriculum, a developmental questionnaire, a variety of books and videos, Keys for Caregiving, and Home Observation for Measurement of the Environment (HOME).

Health Topic(s) Addressed • Family planning, HIV/AIDS, injuries, nutrition, pregnancy and prenatal care, sexual behavior, smoking prevention, substance abuse, violence, and child abuse and neglect.

Geographic Area/Unit • Rural and urban areas in the city and county of Santa Fe.

Program Setting • Local and state health departments.

Target Population • African-American, white, and Mexican American families.

CHA Title • Family support workers.

CHA Roles • Outreach, health education, risk assessment, client advocacy, client services, social support, transportation, and community advocacy.

• Peer workers average 121 hours worked per month. They receive \$7.26 per hour plus 33 percent benefits and mileage. Peer workers receive 40 hours of initial training and 6 hours of inservice training each month.

Number of CHAs • 4.

Number of Clients Served • 183. in 12 Months

Evaluation Plan • Yes.

Methods Used in • A close relationship with the Early Childhood Program at Santa Fe

Recruiting CHAs Community College, recruiting through the State of New Mexico Personnel Department, and advertising.

Methods Used in • Team support, flexible work schedules, and supportive and close supervision.

Retaining CHAs

Methods for Recruiting • Referrals from hospital staff, one-on-one interviews, and meetings at the Teen Clients Parent Center.

Methods for Retaining • Relationships with family support workers, interesting activities, and the provision of transportation.

Program • Healthy Start Home Visitor Program.

Contact • Humphries, Mary A.

• Kansas Department of Health and Environment, Landon State Office Building, 900 Southwest Jackson, Topeka, KS 66612. (912) 296-1234.

Program Dates • 1977-continuing.

Program Delivery • Homes, public health clinics, and hospital/medical clinics.

Funding Source(s) • Kansas State General Funds, the federal Maternal and Child Health Block Grant, and the federal Preventive Block Grant.

Primary Purpose • To provide education and support to pregnant women and families with an infant (birth through 1 year), give children a healthy start in life, and help mothers enjoy their role of being a parent.

Services Offered • Home visitors help mothers obtain information on parent-child relations, community resources, health care and child health assessments, prevention of child injuries and accidents, child development, and immunizations.

Methods Employed • Peer workers are trained to help pregnant mothers with concerns regarding infant care via home visits. The peer workers work with public health nurses who may also make home visits as needed.

Materials Used • Training guides and brochures in both Spanish and English.

Health Topic(s) Addressed • Family planning, injuries, nutrition, pregnancy and prenatal care, physical activity, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural, county, multi-county, and family units, and communities.

Program Setting • Local health department, state health department.

Target Population • All pregnant women and infants with priority given to high-risk families.

CHA Title • Healthy start home visitors.

CHA Roles • Outreach, patient/client advocate, social support or counseling, and community advocate.

CHA Information •

Each peer worker receives approximately 6 hours of initial training and works an average of 10 to 40 hours each month, and is paid approximately \$6 per hour.

Number of CHAs • 100.

Number of Clients Served • in 12 Months

13,000.

Methods Used in • Recruiting CHAs

 Classified advertising, community recognition, and knowledge regarding candidate.

Methods Used in • Retaining CHAs

Salary and support by professional staff.

Methods for Recruiting • Clients

• Community promotion, program integration within health department services, and word of mouth by clients.

Methods for Retaining • Clients

Competent home visitors, favorable reputation of the health department, and other services provided by the health department.

Program • La Paz County un Comienzo Sano/Health Start.

Contact • Torres, Emma; Aguirre, Amanda.

Agency • Western Arizona Area Health Education Center, 281 West 24th Street, Suite 120, Yuma, AZ 85364. (602) 726-8270.

Program Dates • 1989-continuing.

Program Delivery • Schools, homes, and other community locations.

Funding Source(s) • Western Arizona Area Health Education Center.

Primary Purpose • To get low income pregnant women into prenatal care and provide prenatal education.

Services Offered • Free educational classes in English and Spanish, community referrals, and client advocacy.

Methods Employed • Home visits and group education.

Materials Used • Curricula, brochures, videos, slides, posters, and educational flip charts.

Health Topic(s) Addressed • Diabetes, family planning, high blood pressure, HIV/AIDS, nutrition, pregnancy and prenatal care, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural, county, multi-county, communities, and family units.

Program Setting • state health department and health education center.

Target Population • African-American, white, Mexican American, and Native American women from adolescence through adulthood.

CHA Title • Promotoras or health promoters.

CHA Roles • Outreach, health education, risk assessment, patient advocacy, social support, and community advocacy.

CHA Information • Peer workers average 40 hours worked per month. They are compensated at \$6.00 per hour and receive mileage reimbursement. Peer workers receive 20 to 40 hours of initial training and 2 hours of inservice training per month.

Number of CHAs • 4.

Number of Clients Served • 150 pregnant women.
in 12 Months

Methods Used in • Conducting community assessments, person to person advertisement, and community member referral.

Methods Used in • Constant appreciation for their work, continuing training and education, and developing friendships.

Methods for Recruiting • Word of mouth, advertisement, and community networking.

Clients

Methods for Retaining • Good service, friendship, and perseverance.

Clients

Program • Lay Home Visiting Prenatal and Postpartum Care Program.

Contact • Levkovich, Natalie.

Agency • Health Federation of Philadelphia, 1211 Chestnut Street, Suite 801, Philadelphia, PA 19107. (215) 567-8001.

Program Dates • April 1988-continuing.

Program Delivery • Homes, community, and hospitals/medical clinics.

Funding Source(s) • Office of Substance Abuse Prevention, and Philadelphia Department of Public Health, Office of Maternal and Child Health.

Primary Purpose • To enroll and retain high risk pregnant and postpartum women, to facilitate use of prenatal, postpartum and pediatric care, to impact positively on birth outcomes, and to offer information and support to promote positive parenting.

Services Offered • Home visits, health education, psychosocial support, needs assessment, role modeling, linkage to CHC, and other needed services.

Methods Employed • Home visits.

Materials Used • Program protocols and resource directory.

Health Topic(s) Addressed • Adolescent sexual behavior, HIV/AIDS, smoking prevention, nutrition, substance abuse, family planning, pregnancy/prenatal care, violence, and parenting/child care.

Geographic Area/Unit • Urban and family units.

Program Setting • Hospital or medical clinic.

Target Population • Female, adolescent and adult African Americans and Southeast Asian refugees.

CHA Title • Home visitor.

CHA Roles • Outreach, health promotion, health education, social support/counseling, risk assessment, and patient/client advocate.

CHA Information •

Peer workers work an average of 150 hours per month. They are compensated at \$7.50 to \$9.00 per hour. They receive benefits and transit passes. Each worker receives 120 hours of initial training and 3 to 4 hours per month of inservice training. The program does not issue credits, but the Community College of Philadelphia will waive 5.0 credit practicum for students enrolled in their Human Services program. Nurses, health educators, the program coordinator, and others help train the workers.

Number of CHAs • 20 plus 40 trained for other providers.

Number of Clients Served •

• 500.

in 12 Months

Evaluation Plan • Yes.

Methods Used in • Recruiting CHAs

• Community networking, word of mouth, and job bank.

Methods Used in • Retaining CHAs

 Continuous training and peer support, full time job with salary and benefits, and feedback concerning program impact.

Methods for Recruiting • Clients

• Referral from clinical providers, community outreach, and word of mouth.

Methods for Retaining • Clients

Continuous support, relationship with home visitor, consistent contact, and advocacy.

Program • Maternal and Infant Health Outreach Worker (MIHOW).

Contact • Hurst, Sally.

Agency • New River Health Association, Route 1, Box 615-A, Scarbro, WV 25917. (304) 465-0470.

Program Dates • 1982-continuing.

Program Delivery • Homes and community.

Funding Source(s) • Conran N. Hilton Foundation, and under the federal Perinatal Initiative of Community Health Center Grant.

Primary Purpose • To show that a low cost, non-medical, home-based intervention program can improve birth outcomes and child development in social and economically high risk populations.

Services Offered • Home visits, information and education, and parenting groups.

Materials Used • The program uses a set curriculum which guides each stage of the MIHOW program. In addition to the curriculum, the program uses training guides, teaching aids, and a resource directory.

Health Topic(s) Addressed • Family planning, nutrition, pregnancy and prenatal care, physical activity, sexual behavior, smoking prevention, substance abuse, violence, child development, and resource referral.

Geographic Area/Unit • Rural, county, multi-county, family units, and communities.

Program Setting • Community-based agency.

Target Population • African-American and white adolescents, adults, and their children.

CHA Title • Maternal and infant health outreach workers.

CHA Roles • Outreach, health education, client advocacy, social support, limited transportation assistance, and community advocacy.

CHA Information • Peer workers work an average of 40 hours per month. They receive \$20 per home visit. Peer workers receive 60 hours of initial training and additional inservice training.

Number of CHAs • 5.

Number of Clients Served • 100. in 12 Months

Methods Used in • Recruited by community leaders, by workers' interest in flexible work, and by workers' desire to be helpers.

Methods Used in • Monthly training, team building, and non-judgmental, respectful relationships.

Retaining CHAs

Methods for Recruiting • Perinatal care coordination, teen parent programs in the schools, and clinic referrals.

Methods for Retaining • Client satisfaction, positive relationships, and the non-judgmental aspect of the program.

Program • Maternity and Infant Care Project.

Contact • Adams, Caroline.

Agency • University of Florida, Department of Obstetrics and Gynecology, 15 Southeast 1st Avenue, Gainesville, FL 32601. (909) 392-4491.

Program Dates • July 1991-continuing.

Program Delivery • Homes, public health clinics, hospitals/medical clinics, and migrant centers or camps.

Funding Source(s) • Center for Substance Abuse Prevention.

Primary Purpose • To reduce the number of newborns who are affected by substance abuse, to improve pregnancy outcome for substance abusing women, and to help substance abusing women get off drugs permanently.

Services Offered • Health care, social services, therapy, nutrition counseling, and home visits.

Methods Employed • Intense individualized, multidisciplinary care, and home visits.

Health Topic(s) Addressed • Family planning, HIV/AIDS, pregnancy/prenatal care, and substance abuse.

Geographic Area/Unit • Rural, county.

Program Setting • Community-based agency, local health department, and community health clinics.

Target Population • African-American adolescent and adult females.

CHA Title • Resource mothers.

• One-to-one support and guidance, being role models for the client, outreach, health promotion and health education, risk assessment, patient/client advocate, patient/client treatment or services, social support and counseling, transportation provider, and community advocate.

CHA Information • Resource Mothers receive 100 hours of initial training and 8 hours of inservice training every month by nurses, health educators, and the program coordinator. They are paid \$5.50 per hour and are awarded certificates.

Number of CHAs • 6.

Number of Clients Served • 100. in 12 Months

Methods Used in • Recruiting CHAs

• Advertising through newspapers, word of mouth, and using primary industry councils.

Methods Used in • Retaining CHAs

• Daily communication with peer workers, inservice training, and group dynamic workshops.

Methods for Recruiting • Clients

• Providing outreach, locations in health department, and word of mouth about the program.

Methods for Retaining • Clients

Outreach to clients, visiting clients in their home, and serving as an advocate for clients.

Program • Maternity Outreach and Mobilization (MOM) Project.

Contact • Martin, Joanne.

Agency • Indiana University, School of Nursing, 1111 Middle Drive, Indianapolis, IN 46202. (317) 274-4419.

Program Dates • February 1991-continuing.

Program Delivery • Homes and community.

Funding Source(s) • Indianapolis Foundation, and Medicaid.

Primary Purpose • To reduce low birthweight and infant mortality by preventing preterm birth.

Services Offered • Home visits, risk assessment, education, counseling, social support, and linkage with other resources. Door-to-door canvassing, incentives for pregnant women who are not in care and those who refer them, networking among former participants and clinic patients, mobilizing community groups, linkages with Planned Parenthood family planning clinics, and free pregnancy tests.

Materials Used • A manual and a resource mother's guide and curriculum.

Health Topic(s) Addressed • Family planning, nutrition, pregnancy and prenatal care, sexual behavior, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Urban communities and family units.

Program Setting • School, university.

Target Population • African-American and white women and their infants.

CHA Title • Community health workers.

CHA Roles • Outreach, health education, and patient advocacy.

CHA Information • Peer workers average 160 hours worked per month. They receive a salary of \$7.00 per hour and full benefits. They receive 40 hours of initial training and 2 hours per month of inservice training.

Number of CHAs • 2.

- Number of Clients Served 100. in 12 Months
 - Evaluation Plan Yes.
 - Methods Used in Word of mouth and by former project participants.

 Recruiting CHAs
 - Methods for Recruiting Referral from a mother-baby helpline, referral from clinics, and self referral.

 Clients
 - Methods for Retaining Close contact with the program and having their needs met.

 Clients

Program • Mommy's Friends.

Contact • Madewell, Judith.

Agency • Community Services Center, 1100 Community Way, Portales, NM 88130. (505) 356-8576.

Program Dates • July 1993-continuing.

Program Delivery • Homes, community locations, and public health clinics.

Funding Source(s) • Children's Trust Fund.

Primary Purpose • To prevent child abuse and neglect.

Services Offered • Home visits and parenting classes.

Materials Used • A curriculum, educational videos, and newsletters.

Health Topic(s) Addressed • Family planning, pregnancy and prenatal care, adolescent sexual behavior, violence, and child care.

Geographic Area/Unit • Rural, county, and family units, and communities.

Program Setting • Community-based agency.

Target Population • Male and female Mexican Americans, African Americans, whites, and New Mexico Spanish of all ages.

CHA Title • Mommy's Friends.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, social support or counseling, transportation provider, and community advocate.

CHA Information • Each community health advisor (CHA) works an average of 30 hours a month and receives a stipend of \$500 per month. Each CHA receives 40 hours of initial training and 4 hours of inservice training per month.

Number of CHAs • 6.

Number of Clients Served • 40. in 12 Months

Maternal and Child Health

- Methods Used in Newspaper advertising. Recruiting CHAs
- Methods Used in Weekly staff meetings.
 Retaining CHAs
- Methods for Recruiting Referrals from physicians, social services staff, adult probation officers, juvenile probation officers, schools, and neighbors.
- Methods for Retaining Quality of the program.

 Clients

Program • MOMobile.

Contact • Bruzzese, Ginny.

• University of Florida, Department of Obstetrics and Gynecology, Maternity and Infant Care Project, 15 Southeast First Avenue, Suite A, Gainesville, FL 32601. (904) 392-4491.

Program Dates • March 1991-continuing.

Program Delivery • Homes, community, and mobile health unit.

Funding Source(s) • Health Resources and Services Administration, Office of Rural Health Policy.

Primary Purpose • To provide outreach to women in remote areas of Hamilton and Putnam counties in Florida, and to reduce infant mortality by increasing participation in prenatal care.

• Home visits to pregnant women to encourage participation in prenatal care and to teach women about good health practices. Medical student volunteers provide a program of community outreach on weekends. They offer free pregnancy tests and information about pregnancy.

Materials Used • A developed curriculum, training guides, a resource directory, and protocols.

Health Topic(s) Addressed • Cervical cancer, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, nutrition, pregnancy/prenatal care, physical activity, sexual behavior (adolescent), smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural, multi-county, and family units.

Program Setting • University of Florida, Department of Obstetrics and Gynecology.

Target Population • All adolescent and adult women and their infants.

CHA Title • Resource mothers.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, social support or counseling, transportation provider, and community advocate.

Maternal and Child Health

CHA Information •

Resource mothers in this program receive 120 hours of initial training and 4 hours of inservice training every month by nurses, health educators, social workers, and the team leaders. They are paid \$5.25 per hour and 20 cents per mile traveled using their cars.

Number of CHAs • 3.

Number of Clients Served • in 12 Months

• 500 clients. The MOMobile provided health services to 2,000 clients, and prenatal care to 250 women.

Methods Used in • Recruiting CHAs

• Word of mouth, classified advertising in the local newspaper, and central employment agency of the University of Florida.

Methods Used in • Retaining CHAs

• Weekly personal supervision and availability of supervisor by phone anytime, frequent encouragement and affirmation, including workers as part of the health care team, and awarding of certificates.

Methods for Recruiting • Clients

• Social workers on the MOMobile, Healthy Start team from the local health department, and teenage parent program.

Methods for Retaining • Clients

• Regular home visits, consistency and availability of care, and encouragement as they reduce identified problems.

Program • New Mexico Prenatal Care Network.

Contact • Germain, Luz M.

• University of New Mexico, School of Medicine, Maternity and Infant Care Program, Health Sciences and Services Building, Room 125, Albuquerque, NM 87131. (505) 277-0301.

Program Dates • 1988-continuing.

Program Delivery • Homes, migrant centers, public health clinics, and other community locations.

Funding Source(s) • New Mexico Department of Health.

Primary Purpose • To improve access to prenatal care for pregnant women in New Mexico.

Services Offered • Technical assistance to communities, a statewide clearinghouse, a newsletter, resource materials, a database service, guidelines, and expertise in model programs addressing prenatal care.

Methods Employed • Methods employed by the program include assisting counties in developing and coordinating systems of maternal and child health care.

Materials Used • A curriculum entitled Reaching Out: A Training Manual for Community Health Workers in New Mexico; videotapes; other books, and newsletters.

Health Topic(s) Addressed • Pregnancy and prenatal care.

Geographic Area/Unit • Rural and urban communities in New Mexico.

Program Setting • Community-based agency, local health department, hospital or medical clinic, state health department, and university.

Target Population • African-American, white, Hispanic American, and Native American families.

Program • Parent Friend Program.

Contact • Manning-Hood, Cindy.

Agency • Sacred Heart Prenatal Clinic, 675 West Broadway, Eugene, OR 97402. (503) 656-7283.

Program Dates • August 1989-continuing.

Program Delivery • Homes and hospitals/medical clinics.

Funding Source(s) • Children's Trust Fund of Oregon, and the Sacred Heart General Hospital.

Primary Purpose • To provide personal support for prenatal clinic patients, enhance skills and strengths needed for positive parenting, reduce isolation of new families, and facilitate access to needed resources.

Services Offered • Home visits, information on community resources, transportation, translation, and group meetings.

Methods Employed • Teaching clients skills appropriate for good parenting; and education concerning breastfeeding, good nutrition, and family planning issues.

Materials Used • Materials used by the program include a variety of videos, teaching aids, and resource materials.

Health Topic(s) Addressed • Family planning, HIV/AIDS, nutrition, pregnancy and prenatal care, physical activity, sexual behavior, smoking prevention, substance abuse, violence, and stress reduction.

Geographic Area/Unit • County level.

Program Setting • Hospital or medical clinic.

Target Population • Whites, Mexican Americans, Puerto Ricans, South Americans, Chinese, and Japanese.

CHA Title • Volunteer moms.

CHA Roles • Outreach, health education, risk assessment, client advocacy, client services, social support, transportation, and community advocacy.

CHA Information • Volunteer moms work an average of 15 hours per month. They are compensated with transportation and childcare services. Volunteer moms receive 26 hours of initial training and 4 hours per month of inservice training.

Number of CHAs • 25.

45.

Number of Clients Served •

in 12 Months

Recruiting CHAs

Methods Used in • Advertising in local publications and word of mouth.

Methods Used in • Retaining CHAs

Monthly group meetings, monthly one-on-one meetings, and availability of staff to discuss problems.

Clients

Methods for Recruiting • Prenatal clinics, interviews, and advertising.

Methods for Retaining • Clients

Meeting their needs, appropriate matches with volunteers, and skills being taught in a kind and loving manner.

Program • Poughkeepsie Community Health Worker Program.

Contact • Butowsky, Ellen.

• Vassar Brothers Hospital, Poughkeepsie Community Health Worker Program, Joseph Tower Building, Reade Place, Poughkeepsie, NY 12601. (914) 452-3387.

Program Dates • April 1993-continuing.

Program Delivery • Schools, homes, and other community locations.

Funding Source(s) • New York Department of Health.

Primary Purpose • To strengthen relationships between health care providers and at-risk families.

Services Offered • Information, referral and assistance in applying for health care, nutrition services, family support services, enhancement and reinforcement of prenatal education given by medical personnel, and community orientation.

Methods Employed • Intensive outreach and case management services.

Materials Used • Materials used by the program include a variety of videos and brochures.

Health Topic(s) Addressed • Breast cancer, family planning, HIV/AIDS, injuries, nutrition, pregnancy and prenatal care, sexual behavior, substance abuse, violence, and children's health promotion.

Geographic Area/Unit • Urban family units and communities.

Program Setting • Community-based agency.

Target Population • African-American, white, and Hispanic American women of all ages and their children.

CHA Title • Community health workers.

CHA Roles • Outreach, health promotion, risk assessment, client advocacy, client services, social support, and community advocacy.

• Peer workers average 160 hours worked per month. They receive a salary of \$8.40 per hour and full benefits. They receive 30 hours of initial training and 3 hours of inservice training per month.

- Number of CHAs 3.
- Number of Clients Served 60. in 12 Months
 - Evaluation Plan Program goals are evaluated using data from the Annual Report and from computerized patient logs.
 - Methods Used in By newspaper advertisements and by word of mouth.

 Recruiting CHAs
 - Methods Used in Through a pleasant work environment, adequate salary and benefits, and knowing they are serving the community.
 - Methods for Recruiting Agency outreach, street outreach, and word of mouth.

 Clients
 - Methods for Retaining Good followup, prompt service, and being treated with dignity and respect.

 Clients

Program • Preconceptional Intervention For Women at Risk for Low Birthweight Infants.

Contact • Doran, Anna M.

• University of Florida, Department of Obstetrics and Gynecology, Maternity and Infant Care Project, 15 Southeast First Avenue, Suite A, Gainesville, FL 32601. (904) 392-4491.

Program Dates • October 1987-continuing.

Program Delivery • Home.

Funding Source(s) • Health Care Financing Administration.

Primary Purpose • To work with women before they become pregnant with the goal of the improving their next pregnancy.

Services Offered • Women from the community are hired to visit clients in their homes. They help the clients to identify their problems and develop a plan to improve their lives, one step at a time.

Methods Employed • The home visitor gives the client information to help her obtain the resources she needs, and assists her in getting to her health care appointments. She teaches the client about good health practices and encourages her to follow them.

Materials Used • A developed curriculum, videos, brochures, training guides, a resource directory, and developed protocols.

Health Topic(s) Addressed • Cervical cancer, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, nutrition, pregnancy/prenatal care, physical activity, sexual behavior (adolescent), smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural, county, urban, multi-county, and family units.

Program Setting • University of Florida, Department of Obstetrics and Gynecology.

Target Population • Mexican-American, African-American, and white adolescent and adult females and their infants.

• Outreach, health promotion or health education, risk assessment, patient/client advocate, social support or counseling, transportation provider, and community advocate.

CHA Information •

Each resource mother receives 120 hours of initial training and 4 hours of inservice training per month by the team leader, a social worker, a certified nurse midwife, and a police officer. The resource mothers are paid \$5.50 per hour and receive 20 cents per mile traveled in their cars. Certificates are awarded to the workers.

Number of CHAs • 5.

Number of Clients Served • in 12 Months

125.

Methods Used in • Recruiting CHAs

Advertisements in local newspapers, word of mouth, and the central employment agency of the University of Florida.

Methods Used in • Retaining CHAs

Weekly contact in person, availability by phone at all times, letting them know that they are valued as part of the health care team, and frequent celebrations.

Methods for Recruiting • Clients

Liaison nurse in obstetric department of teaching hospital, contact with certified nurse midwives practicing in local hospitals, and checking labor and delivery log for possible clients.

Methods for Retaining • Clients

Positive attitude of Resource Mother, encouragement as the clients reduce their risk factors, and home visits at regular intervals.

Program • Project Care: Women Helping Women.

Contact • Crespo, Richard.

 Agency • Marshall University, School of Medicine, Department of Family and Community Health, 1801 Sixth Avenue, Huntington, WV 25703. (304) 696-7042.

Program Dates • November 1993-continuing.

Program Delivery • Homes and other locations in the community.

Funding Source(s) • West Virginia Department of Health, Division of Health Promotion.

Primary Purpose • To increase participation in prenatal care and to increase the number of healthy pregnancies through empowering women to actively participate in the health care system.

Services Offered • A prenatal education and pregnancy monitoring program.

Methods Employed • Coordination with Lincoln Primary Care Center (LPCC).

Materials Used • Training materials developed by the program to fit the local educational level and culture.

Health Topic(s) Addressed • Family planning, high blood pressure, nutrition, pregnancy and prenatal care, and smoking prevention.

Geographic Area/Unit • Rural areas in the county.

Program Setting • Community-based agency.

Target Population • Women from adolescence through adulthood.

CHA Title • Prenatal health workers.

CHA Roles • Health promotion or education, risk assessment, client services, and social support.

• Peer workers average 6 hours worked per month. They do not receive a salary. Peer workers receive 10 hours of initial training and 2 hours per month of inservice training. The program does not issue credits or certificates.

Number of CHAs • 2.

Evaluation Plan • Program evaluation includes conducting an evaluation survey of the women who participated in the education sessions, conducting an evaluation with the lay health workers of the prenatal education program and the pregnancy monitoring program, conducting an evaluation assessment and planning workshop, and finalizing the organizational structure of the community-based women's organization.

Recruiting CHAs

Methods Used in • Home visits.

Clients

Methods for Recruiting • County prenatal program.

Program • Project Consejeras.

Contact • Waterman, Stephen.

Agency • San Diego County Department of Health Services, Office of Community Disease Control, P.O. Box 85222, San Diego, CA 92186. (619) 692-8661.

Program Dates • October 1992-continuing.

Program Delivery • Schools, homes, worksites, and religious organizations.

Funding Source(s) • Pan American Health Organization.

Primary Purpose • To identify the specific immunization needs of preschool children, to identify and diminish the barriers to service access, to provide followup of children at highest risk, and to provide referral to immunization services.

Materials Used • The program uses developed materials.

Health Topic(s) Addressed • Immunizations.

Geographic Area/Unit • Communities.

Program Setting • Local health department.

Target Population • Mexican-American infants and children.

CHA Title • Consejeras.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, and social support or counseling.

CHA Information • Each peer health worker receives 30 hours of initial training and 2 hours of inservice training per month by the program coordinator.

Number of CHAs • 24.

Number of Clients Served • 150. in 12 Months

Recruiting CHAs

Methods Used in • Networks and community.

Program • Project Life Home Visitors Program.

Contact • Deninger, Patricia.

Agency • Fairfax YMCA, 9124 Little River Turnpike, Fairfax, VA 22031. (703) 323-1222. April

Program Dates • 1985-continuing.

Program Delivery • Schools, worksites, homes, community, public health clinics, and hospitals/medical clinics.

Funding Source(s) • Virginia Department of Health, Division of Maternal and Child Health, Freddie Mac, and various other sources.

Primary Purpose • To ensure that healthy teenage mothers have healthy babies and to help teenagers become better parents.

• Identify pregnant teenagers and get them into prenatal care early; assist teenagers in obtaining Medicaid and other community services; provide basic health advice in areas such as exercise, proper eating habits, infant care and development, and avoiding smoking and alcohol; ensure that teenagers follow instructions from health providers and keep their appointments; assist with babysitting and transportation needs; and help teenagers and their families with problems.

Methods Employed • The program pairs teenage girls with an experienced mother for guidance and practical support through weekly contact (mainly home visits).

Materials Used • A developed curriculum, a training guide, videos, and brochures in Spanish and English.

Family planning, gestational diabetes, heart disease, high blood pressure, HIV/AIDS, childhood injures, nutrition, pregnancy/prenatal care, sexual behavior (adolescents), sexually transmitted disease prevention, smoking prevention, substance abuse, violence, and well baby pediatric care.

Geographic Area/Unit • County and family units, and communities.

Program Setting • Community-based agency, local health department, hospital or medical clinic, state health department, schools, and Fairfax County Human Services Agency.

Target Population •

- Although the program's target population is all pregnant females of any ethnicity between the ages of 12 and 17, with some females being admitted up to the age of 19, the primary ethnic group that utilizes this program are Hispanic females with an average age of 15.
- CHA Title Home visitors.

134.

CHA Roles •

 Outreach, health promotion or health education, risk assessment, client advocate, social support or counseling, transportation provider, and community advocate.

CHA Information •

Each Home Visitor receives approximately 26 hours of initial training (6 hours of inhouse training and 20 hours of infield training) and between 3 to 5 hours of inservice training per month. The training is conducted by nurses, health educators, the program coordinator, and other peer workers employed in this program. Volunteers work an average of 8 to 12 hours per month while paid employees work 25 to 40 hours per month and receive a stipend of \$50 to \$70 per week. Compensation is given for mileage.

Number of CHAs • 15.

Number of Clients Served • in 12 Months

Evaluation Plan •

• An evaluation of the program is conducted quarterly by the State of Virginia and the Program staff.

Methods Used in • Recruiting CHAs

• Advertising in newspapers and community journals, PBS announcements in English and Spanish, and community group presentations.

Methods Used in • Retaining CHAs

• Paid salary, stipends, and community support/recognition awards.

Methods for Recruiting • Clients

 Cooperation from local health departments, cooperation from local schools, and client-to-client referrals.

Methods for Retaining • Clients

Acceptance by resource mothers, consistency, and positive outcomes.

Program • Rainbow Club.

Contact • Myers, Willie M.

Agency • Urban League of Greater Miami, Rainbow Club, 6120 Northwest 7th Avenue, Miami, FL 33127. (305) 758-1369.

Program Dates • July 1990-continuing.

Program Delivery • Homes, community, and program site.

Funding Source(s) • Ounce of Prevention Fund of Florida.

Primary Purpose • To provide an intensive, comprehensive, early intervention program to at-risk expectant mothers, infants, and their families that will promote their physical, cognitive, emotional and social development.

Materials Used • Brochures, educational videos, resource directories, and teaching aids.

Health Topic(s) Addressed
 Cervical cancer, child abuse and neglect, child development, cholesterol screening/education, depression, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, hospice care, immunizations, nutrition, personal hygiene, pregnancy/prenatal care, adolescent sexual behavior, stroke, substance abuse, and violence.

Geographic Area/Unit • Urban and family units.

Program Setting • Community-based agency.

Target Population • African-American adolescent and adult females and their infants and children.

CHA Title • Mentors.

CHA Roles • Outreach, health promotion or education, risk assessment, patient/client advocate, social support or counseling, and transportation.

• Peer workers work an average of 40 hours per month and are paid \$18,500 to \$20,000 per year. Each mentor receives 50 hours of initial training and 25 hours of individual or group inservice training each month. The training is conducted by the program coordinator, a supervisor, and a child development advisor.

Number of CHAs • 4.

- Number of Clients Served 230. in 12 Months
 - Methods Used in Media advertisements, word of mouth, and referrals from other agencies.

 Recruiting CHAs
 - Methods Used in Health and group life insurance, flexibility in scheduling work hours, and paraprofessional training.
 - Methods for Recruiting Door-to-door canvassing, referrals from other clients, and referrals from other social service provider agencies.
 - Methods for Retaining Program incentives, intensive peer mentoring and support through home visits and parent information, and special recognition for accomplishments.

Program • Resource Mothers.

Contact • Deninger, Patricia.

Agency • Fairfax YMCA, 9124 Little River Turnpike, Fairfax, VA 22031. (703) 323-1222. March

Program Dates • 1989-continuing.

Program Delivery • Schools, worksites, homes, community, public health clinics, and hospitals/medical clinics.

Funding Source(s) • Virginia Department of Health, Division of Maternal and Child Health, Freddie Mac, and various other sources.

Primary Purpose • To ensure that healthy teenage mothers have healthy babies and to help teenagers become better parents. To reduce teenage pregnancy through outreach, advice, and support.

• Identify pregnant teenagers and get them into prenatal care early; assist teenagers in obtaining Medicaid and other community services; provide basic health advice in areas such as exercise, proper eating habits, infant care and development, and avoiding smoking and alcohol; ensure that teenagers follow instructions from health providers and keep their appointments; assist with babysitting and transportation needs; and help teenagers and their families with problems.

Methods Employed • Resource Mothers program pairs teenage girls with an experienced mother for guidance and practical support through weekly contact (mainly home visits).

Materials Used • A developed curriculum, a training guide, videos, and brochures in Spanish and English.

Family planning, gestational diabetes, heart disease, high blood pressure, HIV/AIDS, childhood injuries, nutrition, pregnancy/prenatal care, sexual behavior (adolescents), sexually transmitted disease prevention, smoking prevention, substance abuse, violence, and well baby pediatric care.

Geographic Area/Unit • County, family units, and communities.

Program Setting • Community-based agency, local health department, hospital or medical clinic, state health department, schools, and Fairfax County Human Services Agency.

Target Population •

Although the program's target population is all pregnant females of any ethnicity between the ages of 12 and 17, with some females being admitted up to the age of 19, the primary ethnic group that utilizes this program are Hispanic females with an average age of 15.

CHA Title • Home visitors.

CHA Roles •

Outreach, health promotion or health education, risk assessment, client advocate, social support or counseling, transportation provider, and community advocate.

CHA Information •

Each home visitor receives approximately 26 hours of initial training (6 hours of inhouse training and 20 hours of infield training) and between 3 to 5 hours of inservice training per month. The training is conducted by nurses, health educators, the program coordinator, and other peer workers employed in this program. Volunteers work an average of 8 to 12 hours per month while paid employees work 25 to 40 hours per month and receive a stipend of \$50 to \$70 per week. Compensation is given for mileage.

Number of CHAs • 15.

Number of Clients Served • in 12 Months

134.

Evaluation Plan •

An evaluation of the program is conducted quarterly by the state of Virginia and the program staff. Results from these evaluations are not mentioned.

Methods Used in • Recruiting CHAs

Advertising in newspapers and community journals, PBS announcements in English and Spanish, and community group presentations.

Methods Used in • Retaining CHAs

Paid salary, stipends, and community support/recognition awards.

Methods for Recruiting • Clients

Cooperation from local health departments, cooperation from local schools, and client-to-client referrals.

Methods for Retaining • Clients

Acceptance by resource mothers, consistency, and positive outcomes.

Program • Resource Mothers.

Contact • Riley, Mary.

Agency • Family Services of Tidewater, 222 West 19th Street, Norfolk, VA 23517. (804) 622-7017.

Program Dates • July 1991-continuing.

Program Delivery • Schools, worksites, community, homes, public health clinics, and hospitals/medical clinics.

Funding Source(s) • City of Virginia Beach.

Primary Purpose • To increase parents' level of social competency and their ability to be self sufficient.

Services Offered • Social services, transportation, case management, support, parent training, and nutrition counseling.

Materials Used • A developed curriculum, videos, and training guides are the materials used in the program.

Health Topic(s) Addressed • Family planning, nutrition, pregnancy/prenatal care, adolescent sexual behavior, and substance abuse.

Geographic Area/Unit • Communities.

Program Setting • Community-based agency, local health department, hospital or medical clinic, and schools.

Target Population • African-American and white female adolescents and adults and their infants.

CHA Title • Resource mothers.

CHA Roles • Outreach, health promotion or health education, patient/client advocate, and transportation provider.

• Each resource mother receives 16 hours of initial training and 2 hours of inservice training per month. The training of these peer health workers is conducted by nurses, health educators, and the program coordinator.

Number of CHAs • 15.

Number of Clients Served • 120. in 12 Months

Recruiting CHAs

Methods Used in • Newspaper advertising and word of mouth.

Retaining CHAs

Methods Used in • Recognition, setting a standard of quality for the program, and training.

Methods for Recruiting • Clients

Department of Social Services Medicaid workers, public school guidance counselors, and peer group contacts.

Clients

Methods for Retaining • Weekly contact, involving family in visits, and biweekly peer group sessions.

Program • Resource Mothers Program.

Contact • Borders, Melinda.

Agency • Big Sandy Health Care, Inc., Mud Creek Clinic, Route 2, Box 129, Grethel, KY 41631. (606) 886-8546.

Program Dates • October 1991-continuing.

Program Delivery • Schools, homes, hospitals/medical clinics, and other community locations.

Funding Source(s) • Christian Appalachian Project, the Appalachian C. Fund, the Kellogg Foundation, and various other sources.

Primary Purpose • To address adolescent pregnancy and its related problems such as low birthweight infants, short times between pregnancies, and infant mortality.

Services Offered • Monthly home visits, prenatal care, care of the newborn, maternal assessments, and childbirth classes.

Methods Employed • Use of lay home visitors to assist pregnant teens and teen parents.

Health Topic(s) Addressed
 Breast, cervical, and uterine cancer, cholesterol screening or education, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, injuries, nutrition, osteoporosis, pregnancy and prenatal care, physical activity, adolescent sexual behavior, smoking prevention, substance abuse,

urinary incontinence, violence, and newborn and postpartum health.

Geographic Area/Unit • Rural areas.

Program Setting • Community-based agency, hospital or medical clinic.

Target Population • African-American and white women from adolescence through adulthood, and

their infants.

CHA Title • Resource mothers.

CHA Roles • Outreach, health education, risk assessment, patient advocacy, social support,

transportation assistance, and community advocacy.

CHA Information • Resource mothers work an average of 100 hours per month. They receive

compensation per home visit. Peer workers receive 300 hours of initial training and 4 hours of inservice training per month. The program issues

certificates.

- Number of CHAs 2.
- Number of Clients Served 66. in 12 Months
 - Evaluation Plan Yes. Statistical goals are evaluated at the end of each year. Additionally, client and resource mother questionnaires evaluate the satisfaction level of these two groups.
 - Methods Used in Good lines of communication and a fair distribution of clients served by each worker.
 - Methods for Recruiting Word of mouth and other methods.

 Clients
 - Methods for Retaining Supplemental incentives, emergency visits and social calls, and having the program available to clients at all times.
- CHID Accession Number HE94P1548

Program • Resource Mothers Program.

Contact • Villarreal, Fran.

Agency • Roanoke City Department of Health, 515 8th Street, SW., Roanoke, VA 24016. (703) 857-7849.

Program Dates • July 1990-continuing.

Program Delivery • Schools, worksites, religious organizations, homes, public health clinics, hospitals, social service agencies, and other community locations.

Funding Source(s) • Federal, state, and local government agency; and non-profit.

Primary Purpose • To admit pregnant adolescents into services as early into their pregnancy as possible to facilitate early prenatal care, a positive pregnancy outcome and referral to any services and programs for which they may be eligible.

Services Offered • Guidance and assistance in obtaining needed services.

Methods Employed • Use of resource mothers to provide services to the teens.

Materials Used • Videos, audio tapes, and curricula.

Health Topic(s) Addressed • Family planning, HIV/AIDS, injuries, nutrition, pregnancy and prenatal care, physical activity, adolescent sexual behavior, smoking prevention, substance abuse, violence, and sexual assault.

Geographic Area/Unit • Urban communities and family units.

Program Setting • Local health department, state health department.

Target Population • African-American and white adolescents and their infants.

CHA Title • Resource mothers.

CHA Roles • Outreach, health education, risk assessment, client advocacy, client services, social support, transportation, and community advocacy.

• Resource mothers work approximately 80 hours per month. They receive a salary of \$6.62 per hour plus a mileage reimbursement. They receive 40 hours of initial training and 6 hours of inservice training per month. The program issues certificates.

- Number of CHAs 7.
- Number of Clients Served 130. in 12 Months
 - Evaluation Plan Yes.
 - Recruiting CHAs
 - Methods Used in Word of mouth, and minority press advertisements.
 - Retaining CHAs
 - Methods Used in Regular staff meetings, relevant conferences and training, and open communication.
 - Clients
 - Methods for Recruiting Word of mouth, referrals from clinics and schools, and outreach into target communities.
 - Methods for Retaining Clients
- Establishing relationships, providing transportation, and advocacy for services.

Program • Resource Mothers Project.

Contact • Sterner, Roy.

Agency • Allegheny County Department of Health, Wandu Building, 2nd Floor, 339 5th Avenue, McKeesport, PA 15132. (412) 664-8886.

Program Dates • July 1993-continuing.

Program Delivery • Homes.

Funding Source(s) • Pennsylvania Department of Health.

Primary Purpose • To identify at-risk pregnant women residing in targeted high-risk communities early in their pregnancies to provide practical assistance and social support for these women during and after pregnancy.

• Home visits, educational and informative counseling related to prenatal and postpartum care, facilitation of regular prenatal visits, referrals for health and social services, problem solving, material assistance, and assisting with transportation.

Methods Employed • Working with women through their pregnancies until their babies are 1 year old.

Materials Used • Purchased and developed curricula, guidelines, handbooks, videos, and pamphlets.

Health Topic(s) Addressed • Family planning, nutrition, pregnancy and prenatal care, adolescent sexual behavior, smoking prevention, and substance abuse.

Geographic Area/Unit • Urban, county.

Program Setting • Local health department.

Target Population • African-American women and their infants.

CHA Title • Resource mothers.

CHA Roles • Outreach, health promotion, risk assessment, client advocacy, social support, transportation, and community advocacy.

CHA Information • Peer workers work an average of 160 hours per month. They receive a salary of \$10 per hour and transportation vouchers. Peer workers receive initial training of 2 months and 8 hours per month of inservice training. The program issues certificates.

Number of CHAs •

Methods Used in • Recruiting CHAs

Employment agencies, the Department of Public Welfare, and recruitment from within the health department.

Methods Used in • Retaining CHAs

Competitive wages, thorough training, and supervision.

Methods for Recruiting • Clients

Face-to-face encounters, canvassing community organizations, and information booths at community fairs.

Methods for Retaining • Clients

Good relationships with resource mothers, home visits, and provision of transportation.

Program • Resource Sisters/Companeras Program.

Contact • Rudner, Nancy.

*Agency • March of Dimes Birth Defects Foundation, East Central Florida Chapter, 135 West Central Boulevard, Suite 440, Orlando, FL 32801. (407) 849-0790.

Program Dates • October 1992-continuing.

Program Delivery • Homes, migrant centers, public health clinics, and wherever four or more women can meet in the community.

Funding Source(s) • Robert Wood Johnson Foundation, and the state of Florida Healthy Start Program.

Primary Purpose • To ensure that every woman in East Central Florida has the social support needed to have a healthy pregnancy and to prevent perinatal substance abuse.

Services Offered • Support groups for pregnant and postpartum women.

Methods Employed • Training women from target communities to be peer facilitators, providing outreach and case management, and developing empowerment.

Materials Used • Various videos and brochures in English and Spanish.

Health Topic(s) Addressed • Family planning, HIV/AIDS, injuries, nutrition, pregnancy and prenatal care, sexual behavior, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural and urban family units and communities at the county level.

Program Setting • Non-profit voluntary organization.

Target Population • African-American, white, and Hispanic-American women from adolescence through adulthood.

CHA Title • Resource sisters or facilitators.

CHA Roles • Outreach, health promotion, client advocacy, and social support.

CHA Information •

Resource sisters work an average of 160 hours per month. They receive a salary of \$5.76 per hour and full benefits. They receive 80 hours of initial training and 24 hours of inservice training per month. Program coordinators meet with resource sisters quarterly to identify any barriers or concerns related to various aspects of implementation of their role. The program issues certificates.

Number of CHAs • 7.

Number of Clients Served • in 12 Months

• 700.

Evaluation Plan • Yes.

Methods Used in • Recruiting CHAs

• Peer workers are recruited through other agencies and through clients.

Methods Used in • Retaining CHAs

• Salary and benefits, continuous training, and development of a team.

Methods for Recruiting • Clients

• Outreach by peer workers, outreach in prenatal care, and word of mouth.

Methods for Retaining • Clients

Having support groups which meet their needs in content, style, and flavor, and by continual outreach.

CHID Accession Number •

• HE94P1552

Program • University of New Mexico/Baby Amigo, Community Sisters Project.

Contact • Mullen, Tonie.

Agency • University of New Mexico, Family Development Program, Onate Hall, Room 213, Albuquerque, NM 87131. (505) 277-8974.

Program Dates • August 1991-continuing.

Program Delivery • Homes and other locations in the community.

Funding Source(s) • US West Foundation.

Primary Purpose • To serve families from pregnancy through their children's second year.

Services Offered • Home visits, support groups, and educational activities.

Methods Employed • Use of incentive gifts to motivate expectant mothers to keep prenatal care appointments.

Materials Used • Reaching Out, a Training Manual for Community Health Workers in New Mexico, developed by the New Mexico Prenatal Care Network.

Health Topic(s) Addressed • Family planning, nutrition, pregnancy and prenatal care, adolescent sexual behavior, and violence.

Geographic Area/Unit • Rural and urban family units and communities.

Program Setting • Community-based agency, and university.

Target Population • African-American, white, and Mexican-American adolescents, adults, and their infants.

CHA Title • Community sisters.

CHA Roles • Health promotion, client advocacy, social support, transportation, and community advocacy.

• Community sisters work approximately 4 hours per month. They do not receive compensation. They receive approximately 40 hours of initial training plus supportive assistance. The program issues certificates.

Number of CHAs • 21.

- Number of Clients Served 21. in 12 Months
 - Evaluation Plan Yes.
 - Methods Used in Word of mouth, church groups, and women's groups.

 Recruiting CHAs
 - Methods Used in Continued support, acknowledgement that their work is important, and certificates and gifts.
 - Methods for Recruiting Networking with other agencies, word of mouth, and referrals from women in the program.
 - Methods for Retaining Trust, being dealt with consistently when receiving services, and knowing that the program has made an investment in them.
- CHID Accession Number HE94P1555

Program • West Virginia WIC Program: Breastfeeding Education.

Contact • Ferris, Denise.

Agency • West Virginia Department of Health and Human Resources, Bureau of Public Health, 1411 Virginia Street, E., Charleston, WV 25301. (304) 558-0030.

Program Dates • January 1990-continuing.

Program Delivery • Public health clinics.

Funding Source(s) • Federal sources.

Primary Purpose • To provide breastfeeding information prenatally to interested women and families, and phone or personal support and information to breastfeeding mothers.

Services Offered • Free personal counseling in clinics and phone counseling.

Methods Employed • The program employs WIC Breast Feeding Counselors who are mothers who have breastfed or who are currently breastfeeding. The counselors are employed part-time by the WIC Program to help other WIC mothers with breastfeeding.

Materials Used • Videos, brochures, training guides, and teaching aids.

Health Topic(s) Addressed • Breastfeeding information and support.

Geographic Area/Unit • Rural and state.

Program Setting • State health department.

Target Population • Adolescent and adult females who are breastfeeding or considering breastfeeding their infants.

CHA Title • Breast feeding counselors.

CHA Roles • Health promotion or health education and client counseling or support.

• Each counselor receives between 16-29 hours of initial training and 1 hour of inservice training per month, which is conducted by the program coordinator and health educators. Counselors work an average of 20 to 30 hours per month at \$5.00 per hour.

- Number of CHAs 50.
- Number of Clients Served 9,000. in 12 Months
 - Methods Used in Announcing needs in WIC clinics and recruiting brochures.

 Recruiting CHAs
 - Methods Used in Flexibility of work hours, phoning at home, and ability to bring their infant to clinic worksite.
 - Methods for Recruiting Advertising free food benefits.

 Clients

Program • Women, Infants, and Children (WIC) Breastfeeding Peer Counselor Program.

Contact • Stremler, Jewell.

Agency • Texas Department of Health, Bureau of Nutrition Services, Women, Infants, and Children (WIC) Program, 1100 West 49th Street, Austin, TX 78756. (512) 458-7437, ext. 3495.

Program Dates • April 1991-continuing.

Program Delivery • Schools, homes, public health clinics, hospitals, and other community locations.

Funding Source(s) • Texas Department of Health, Bureau of Nutrition Services, Women, Infants, and Children (WIC) Program.

Primary Purpose • To encourage breastfeeding throughout Texas.

Services Offered • Peer counseling.

Methods Employed • The use of breastfeeding peer counselors.

Materials Used • A developed training manual, WIC Breastfeeding Peer Counselor Training Manual, and a developed video, WIC Peer Counselors Share Their Experiences.

Health Topic(s) Addressed • Breastfeeding and nutrition.

Geographic Area/Unit • Rural and urban areas at the state level.

Program Setting • Community-based agency, local health department, hospital or medical clinic, state health department, and schools.

Target Population • All women and their infants.

CHA Title • Breastfeeding peer counselors or mother to mother support persons.

CHA Roles • Outreach, health promotion, client advocacy, client services, social support, and referral.

CHA Information • Peer workers average 20 hours worked per month. They receive a salary from \$5 to \$7 per hour. As an incentive, they can bring their infants to work with them. They receive 20 hours of initial training and 1 to 2 hours of inservice training per month. The program issues certificates.

Number of CHAs • 200.

Number of Clients Served • in 12 Months

They have served thousands of people.

Evaluation Plan •

The program has an evaluation plan. A statistical evaluation of the pilot program will assess whether mothers are choosing breastfeeding at a higher rate after peer counselor contact.

Methods Used in • Recruiting CHAs

Recommendations from clinic staff, health professionals, and other peer counselors.

Retaining CHAs

Methods Used in • Encouragement and support from the peer counselor coordinator and through respect and recognition from other staff.

Methods for Recruiting • Clients

Talking to peer counselors, peer counselor presentations, and hotlines.

Clients

Methods for Retaining • Followup phone calls and by publicizing services of the counselors in clinics.

Program • Women, Infants, and Children (WIC).

Contact • Wagner, Cecilia K.

Agency • Okaloosa County Public Health Unit, 221 Hospital Drive, Ft. Walton Beach, FL 32548. (904) 833-9254.

Program Dates • October 1992-continuing.

Program Delivery • Homes, public health clinics, hospitals, and other community locations.

Funding Source(s) • Okaloosa County Public Health Unit Women, Infants, and Children (WIC) Program.

Primary Purpose • To increase breastfeeding initiation rates and to increase the duration of breastfeeding in the low income population.

Services Offered • Peer counseling, nutrition counseling, and supplemental foods.

Methods Employed • Group classes, individual counseling, and referrals.

Materials Used • La Leche League materials and pamphlets from the state of Florida.

Health Topic(s) Addressed • Breastfeeding.

Geographic Area/Unit • Rural and urban family units at the county level.

Program Setting • Local health department.

Target Population • African-American, white, Hispanic-American, Asian-American, and Pacific-Islander adolescent and adult women and their infants.

CHA Title • Breastfeeding peer counselors.

CHA Roles • Outreach, health promotion, and client advocacy.

CHA Information • Peer counselors work an average of 40 hours per month. They do not receive compensation. They receive 20 hours of initial training and 1 to 2 hours of inservice training per month.

Number of CHAs • 12.

Number of Clients Served • 500. in 12 Months

Evaluation Plan • Yes. Evaluation tools include three different reports: Infants ever breastfed, duration of breastfeeding, and infants currently breastfed.

Methods Used in • Recruiting CHAs

Word of mouth, mothers who have received help and then want to volunteer, and referrals from professional staff.

Retaining CHAs

Methods Used in • Communication, positive reinforcement, and appreciation expressed by clients.

Clients

Methods for Recruiting • Self referrals and staff referrals.

Clients

Methods for Retaining • Positive experiences with the peer counselors and WIC benefits such as food.



Migrant Workers

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Program • Camp Health Aide Program.

Contact • Robinson, June G.

Agency • St. Mary Center, Midwest Migrant Health Information Center, 502 West Elm Avenue, Monroe, MI 48161. (313) 243-0711.

Program Dates • 1985-continuing.

Program Delivery • Worksites, homes, locations within the community, and migrant centers or camps.

Funding Source(s) • Michigan Department of Public Health, the United Migrant Opportunity Services, Inc., the W.K. Kellogg Foundation, and various other sources.

Primary Purpose • To involve migrant farmworkers as camp health aides by training them in basic health care; provide ongoing training, resource information and supervision for the camp health aides; develop improved coordination and information flow between migrant farmworkers and the migrant health center; and provide opportunities for the empowerment of migrant farmworkers.

• The Camp Health Aides give group and individual health education, give first aid, translate for camp residents, assist the clinic outreach nurse, and make referrals to the clinic and other agencies.

Methods Employed • Home visits, small group presentations, and observing and confronting conditions in migrant camps and workplaces.

Materials Used • Camp Health Aide Manual, Teaching Notes to the Camp Health Aide Manual, Harvest of Hope, and Implementation Guide.

Health Topic(s) Addressed • Diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, injuries, nutrition, pregnancy, stroke, substance abuse, and violence.

Geographic Area/Unit • Rural, county, multi-county, family, and community.

Program Setting • Community-based agency.

Target Population • Mexican Americans, Central Americans, Puerto Ricans, African Americans, whites, and both males and females of all ages.

CHA Title • Camp health aides.

Migrant Workers

CHA Roles • Outreach, health education, client advocacy, counseling, and community advocacy.

CHA Information • Camp health aides work approximately 80 hours per month and receive 80 dollars per week. They receive 20 hours of initial training, and 8 hours per month of continuing training.

Number of CHAs • 105.

Number of Clients Served • 3,500. in 12 Months

Evaluation Plan • Yes. A learning session evaluation form and a camp health aide group educational session record are available.

Methods Used in • Referrals from other migrant farmworkers, referrals from professionals who serve the migrant community, and referrals from other camp health aides.

Methods Used in • Payment, accommodation to schedules and lifestyles, and giving value to the work.

Methods for Recruiting • Aides go door-to-door, present educational sessions, and participate in health screenings.

Methods for Retaining • Providing quality health care, helping clients get the services they need, and treating clients with respect.

Program • Camp Health Aides.

Contact • Moriarty, Lynn.

Agency • Clinica Adelante, Inc., 16560 North Dysart Road, Surprise, AZ 85374. (602) 546-2194.

Program Dates • May 1992-continuing.

Program Delivery • Worksite, homes, community, migrant centers or camps, and medical clinics.

Funding Source(s) • Arizona Department of Health Services, and by the Midwest Migrant Health Information Office.

Primary Purpose • To provide health information and promote personal and dental hygiene, nutrition, prenatal care, well-child care, and environmental health to migrant farm workers in Arizona.

Services Offered • Taking vital signs, translation, personal and dental hygiene, nutrition, prenatal care, well-child care, first aid, environmental health, and adult and childhood illnesses.

Methods Employed • The program employs lay health workers who live in the communities they service and who reflect the ethnic, socioeconomic, and linguistic characteristics of the community.

Materials Used • Educational classes, training guides, and teaching aids in both Spanish and English.

Cholesterol screening and education, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, injuries, nutrition, pregnancy/prenatal care, physical activity, adolescent sexual behavior, stroke, substance abuse, violence, and pesticide safety.

Geographic Area/Unit • Rural, county, state, family units, communities, and farm labor camps in Arizona.

Program Setting • Community-based agency, and hospital or medical clinic.

Target Population • Male and female Mexican Americans, Central Americans, and whites from infants to adults.

CHA Information •

The health workers receive 20 hours of training. They devote approximately 20 hours per week to the role of camp health aide. They receive a stipend of \$80 per week for their participation. Training is facilitated by a program coordinator, who is a bilingual nurse or health educator. Training continues throughout the summer at weekly group sessions and weekly individual meetings, both conducted by the program coordinator. One full-time program coordinator supervises from 8 to 10 camp health aides through the summer.

Number of CHAs • 8 camp health aides.

Methods Used in • Recruiting CHAs

• Recommendations from community agencies, past applicants to the clinic, and referrals from existing peer workers.

Methods Used in • Retaining CHAs

• Flexibility in hours, responding to input from camp health aides on improving data collection tools, and building a personal relationship with community health advisors.

Methods for Recruiting • Clients

• Word of mouth referrals to peer workers, clinic staff referrals of peer workers, and peer workers active and visible in the community.

Methods for Retaining • Clients

• Ensuring that clients desire peer worker support and services; providing concrete services, information, and support; and providing follow-through in addressing clients' needs.

Program • Familia Sana. (Healthy Family).

Contact • Wiggins, Noel.

Agency • Clinica Del Carino, P.O. Box 1217, Hood River, OR 97031. (503) 386-4880.

Program Dates • October 1991-continuing.

Program Delivery • Schools, homes, community, migrant centers or camps, local health departments, and medical schools.

Funding Source(s) • Public Health Service Office of Minority Health, Office of Rural Health Policy.

Primary Purpose
 To improve the mental and physical health status of Hispanic migrant and seasonal farm workers; to prevent and ameliorate problems of substance abuse, family violence, and mental illness; to further demonstrate effectiveness of the health promoter model; and to increase access to and appropriateness of existing services.

Services Offered • Health care services, health education classes for men and women, home visits, social support groups, and workshops to train trainers.

Methods Employed • Capacitation courses, popular education, and workshops.

Materials Used • Purchased books in English and Spanish such as Helping Health Workers Learn, When There is No Doctor; and targeted education materials.

Health Topic(s) Addressed • High blood pressure, adolescent sexual behavior, HIV/AIDS, smoking prevention, breast and cervical cancer, breast education, injuries, nutrition, substance abuse, diabetes, family planning, pregnancy/prenatal care, violence, physical activity, mental health, and depression.

Geographic Area/Unit • Rural, multi-state, county, family units, multi-county, and community.

Program Setting • Hospital or medical clinic, and migrant and community health center.

Target Population • Mexican American, South American, Mixtec Indian male and female infants, children, adolescents, and adults.

CHA Title • Lay health promoters.

CHA Roles • Outreach, patient/client treatment or services, health promotion/health education, social support/counseling, patient/client advocate, and community advocate.

Number of CHAs • 11.

Evaluation Plan • Yes.

Methods Used in ● Word of mouth, and radio. Recruiting CHAs

Methods Used in • Sharing power, paying fair salaries, and an informal and fun learning Retaining CHAs atmosphere.

Methods for Recruiting • Referrals from parent clinic and other agencies.

Clients

Methods for Retaining • Making learning fun and empowering, choosing peer workers who have had experiences similar to clients.

Program • Maternal-Child Health Promotora Program.

Contact • Sapien, Sylvia.

Agency • La Clinica de Familia, Inc., P.O. Drawer 70, Mesilla, NM 88046. (505) 526-1105.

Program Dates • September 1992-continuing.

Program Delivery • Homes, community, and hospitals/medical clinics.

Funding Source(s) • New Mexico Department of Health.

Primary Purpose • To improve the rate of early prenatal care in New Mexico.

Services Offered • Outreach, screening, followup, education, and referrals.

Methods Employed • Case management, risk assessments, and crisis intervention.

Materials Used • Educational classes, educational videos, brochures, training guides, teaching aids, and a resources directory, in both Spanish and English.

Health Topic(s) Addressed • Cholesterol screening and education, diabetes, family planning, heart disease, high blood pressure, nutrition, pregnancy and prenatal care, physical activity, adolescent sexual behavior, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural, family units, and communities in New Mexico.

Program Setting • Community-based agency, and medical clinics.

Target Population • Female Mexican Americans and whites from infancy to adulthood.

CHA Title • Promotoras/community health workers.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocacy, social support or counseling, and community advocacy.

CHA Information • Peer health workers work approximately 80 hours each month at \$5.25 per hour.

Number of CHAs • 4.

Migrant Workers

Number of Clients Served • 400. in 12 Months

Evaluation Plan • An evaluation plan is under revision.

Methods Used in • Word of mouth, newspaper, and agency referrals. Recruiting CHAs

Methods Used in • Empowerment, pay, and social rewards. Retaining CHAs

Methods for Recruiting • Word of mouth and agency referrals.

Clients

Methods for Retaining • Repetition, inclusion of family in the program, flexibility of staff, and reinforcement.

Nutrition

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Program • Expanded Food and Nutrition Education Program (EFNEP).

Contact • Willis, Wells.

Agency • US Department of Agriculture, Ag Box 0925, 14th Street and Independence Avenue, SW., Washington, DC 20250. (202) 720-7151.

Program Dates • 1968-continuing.

Program Delivery • Schools, worksites, religious organizations, homes, migrant centers, public health clinics, hospitals, and other community locations.

Funding Source(s) • Cooperative Extension Service.

Primary Purpose • To assist limited resource families and youth in acquiring the knowledge, skills, attitudes, and changed behavior necessary for nutritionally sound diets, and to contribute to their personal development and the improvement of the total family diet and nutritional well-being.

Methods Employed • Cooperative Extension System professionals train and supervise paraprofessionals and volunteers who teach food and nutrition information and skills to limited resource families and youth.

Materials Used • The materials used by the program vary from state to state; some are in Spanish.

Health Topic(s) Addressed • Cancer, cholesterol education, diabetes, heart disease, high blood pressure, injuries, nutrition, osteoporosis, pregnancy and prenatal care, physical activity, stroke, and substance abuse.

Geographic Area/Unit • All communities on a national basis.

Program Setting • Federal, state, and local Cooperative Extension Services.

Target Population • All races, ethnic backgrounds, and ages.

CHA Title • Paraprofessionals or nutrition assistants.

CHA Roles • Outreach, health promotion or education, client advocacy, social support, and community advocacy.

CHA Information •

Paraprofessionals in the program average 112 hours worked per month; other volunteers average 83 hours worked per month. Paraprofessionals receive compensation; volunteers are not compensated. The number of hours of initial training received by peer workers varies, as does the number of hours of inservice training. The program issues certificates.

Number of CHAs • 2,798 paraprofessionals and 48,621 volunteers.

Number of Clients Served • 661,359. in 12 Months

Evaluation Plan • Yes.

Recruiting CHAs

Methods Used in • Methods for recruiting peer workers vary from state to state.

Retaining CHAs

Methods Used in • Methods for retaining peer workers vary from state to state.

Program • Healthy Choices: Family Nutrition Program and Alcohol Decisions.

Contact • Kusske, Erin.

Agency • Carver County Extension Service, 609 West 1st Street, Wacoma, MN 55318. (612) 442-4496.

Program Dates • 1990-continuing.

Program Delivery • Schools, religious organizations, homes, and various community settings.

Funding Source(s) • United States Department of Agriculture.

Primary Purpose • To teach Minnesota's low-income families about good nutrition, smart shopping, and food safety.

Services Offered • The program offers nutrition classes and free summer day camps to children between the ages of 5 and 8.

Methods Employed • The methods employed in this program include group classes, while-you-wait sessions, displays, demonstrations, and newsletters.

Materials Used • Developed curricula and educational videos.

Health Topic(s) Addressed • Cholesterol screening/education, nutrition, physical activity, and substance abuse.

Geographic Area/Unit • Carver County, Minnesota.

Program Setting • Statewide, University of Minnesota.

Target Population • White males and females between the ages of 5 and 8 and adults who are eligible for food stamps.

CHA Title • Community program assistant.

CHA Roles • Outreach, health promotion or health education, risk assessment, and transportation provider.

• The community health worker works 130 hours per month, receives 40-50 hours of inservice training by health educators per year and is compensated at \$9.23 per hour.

Nutrition

Number of CHAs • 1.

Number of Clients Served • 5,195. in 12 Months

Methods Used in • Newspaper advertising. Recruiting CHAs

Methods Used in • Renewal of program funding. Retaining CHAs

Methods for Recruiting • Passing out flyers door-to-door, referrals through other social services, and word of mouth through clients.

Methods for Retaining • Scheduling classes for their children when school is out for the summer.

Clients

Program • PINAH/CHAN: Community Health Advisor Network.

Contact • Hinton, Agnes W.

Agency • Freedom From Hunger, Community Health Advisor Network, 633 North State Street, Suite 602, Jackson, MS 39202. (601) 354-4225.

Program Dates • January 1993-continuing.

Program Delivery • Schools, religious organizations, homes, community settings, and public health clinics.

Funding Source(s) • Robert Wood Johnson Foundation, the William Randolph Hearst Foundation, and various other sources.

Primary Purpose • To promote and support adoption of community health advisor programs by serving as a source of information, training, and technical assistance.

Services Offered • CHAN empowers natural helpers who live and work in low-income communities through training, access to service agencies, and networking. These volunteers unite with local service providers to improve community access to health care services while expanding health education and community action for health promotion.

Materials Used • Materials used in this program are in English and include a facilitator guide, developed curriculums, training videos, and health brochures.

Health Topic(s) Addressed •

 Alzheimer's disease, arthritis, cancer, cholesterol screening/education, diabetes, family planning, heart disease, high blood pressure, HIV/AIDS, injuries, nutrition, osteoporosis, pregnancy/prenatal care, physical activity, adolescent sexual behavior, smoking prevention, stroke, substance abuse, and violence.

Geographic Area/Unit • Rural, county, state, multi-county, multi-state, and family units, and communities.

Program Setting • Community-based agency, local health department, state health department, and community health centers.

Target Population • Males and females, all ethnic and racial groups, and all age levels.

CHA Title • Community health advisors.

CHA Roles • Outreach, health education or health promotion, patient/client advocate, patient/client services, social support or counseling, transportation provider, and community advocate.

• Each community health advisor receives 30 hours of initial training, which is conducted by nurses, nutritionists, home economists, physicians, social workers, sanitarians, firemen, teachers, and civic leaders. The community health advisors are unpaid but receive training and attend meetings which are paid for by the program. Certificates are issued to these volunteers.

Number of CHAs • 114.

Number of Clients Served • 20,000. in 12 Months

Evaluation Plan
 The CHAN Evaluation Plan, published in August 1993, is a comprehensive evaluation containing evaluation questions, required data variables, data sources, and collection methods regarding consumer definition, consumer-expressed needs, prevailing attitudes toward services, prevailing attitudes toward program changes, community leaders, perceived community needs, perceived capacity for change in the community, and perception of peer health workers as agents for change.

Methods Used in • Interviewing service providers, community leaders, and community residents to secure potential names, and meeting individually with potential community health advisors to discuss training and their role in the program.

Methods Used in • Regular communications, regular meetings, and a variety of projects so that different interests are served.

Methods for Recruiting • Mass communications media and one-on-one contacts.

Clients

Methods for Retaining • Good service, referrals, and a good program.

Clients

Program • Smart and Healthy Supermarket Tours.

Contact • Ensle, Karen M.

Agency • Rutgers Cooperative Extension of Union County, 300 North Avenue, E., Westfield, NJ 07090. (908) 654-9854.

Program Dates • September 1990-continuing.

Program Delivery • Schools, worksites, religious organizations, homes, community, migrant centers or camps, public health clinics, and hospitals/medical clinics.

Funding Source(s) • US Department of Agriculture.

Primary Purpose • To help the consumer be more knowledgeable about healthy, nutritious food choices through accurate label reading and a comparison of various food products, and to help consumers select the best possible choices for themselves and their families.

Services Offered • Teach consumers how to choose foods low in fat, salt, and sugar; assist busy consumers in choosing foods that are nutrient-dense and less costly; teach consumers how to calculate the percentage of calories from carbohydrate and protein in various products so that a comparison can be made; and increase the visibility of Cooperative Extension programs in New Jersey and reach new populations.

Materials Used • A developed curriculum and a teaching guide that outlines the supermarket tour.

Health Topic(s) Addressed • Rural, county, state, national, urban, multi-county, multi-state, family units, and communities.

Geographic Area/Unit • Rural, national, multi-state, county, urban, family units, state, and multi-county communities.

Program Setting • Cooperative Extension Service.

Target Population • Children, adolescents, and adults from all racial and ethnic backgrounds.

CHA Title • Trained volunteer.

CHA Roles • Health promotion or health education, and community advocate.

Nutrition

CHA Information • The program volunteers receive grants, certificates of service, and training from dietitians, home economists, and food safety specialists.

Number of CHAs • 1.

Number of Clients Served • 1,000 out-of-state and 1,000 in-state residents.

in 12 Months

Methods Used in • Newspaper advertising and other programs. Recruiting CHAs

Methods Used in • Building rapport and giving certificates of appreciation. Retaining CHAs

Methods for Recruiting • Newspaper articles, television and radio announcements, and word of mouth.

Clients

Quality of Life

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Program • Elder Network.

Contact • Doucette, Mary.

Agency • Elder Network, Assisi Heights, Box 4900, Rochester, MN 55903. (507) 285-5272.

Program Dates • September 1988-continuing.

Program Delivery • Community, religious organizations, and high-rise retirement centers.

Funding Source(s) • Elder Network.

Primary Purpose • To build a functional broad-based network of mental health support services for older adults by using the services of peer volunteers.

Services Offered • Peer counseling and peer education.

Methods Employed • A process of inquiry approach to education and counseling.

Materials Used • A trainer manual, a trainee manual, brochures, flyers, referral cards, videotapes, and a community assessment survey.

Health Topic(s) Addressed • Nutrition, physical activity, substance abuse, and mental health issues in aging.

Geographic Area/Unit • Rural, county, and multi-county areas.

Program Setting • Private non-profit agency.

Target Population • White and Asian older adults over age 55.

CHA Title • Peer counselors or peer educators.

CHA Roles • Outreach, health education, client advocacy, and social support.

• Peer workers are not compensated for their work, but receive mileage reimbursement for presenting peer education sessions. Peer workers receive initial training of 42 hours. Subsequently, they devote 2 to 3 hours per month to case review.

Number of CHAs • 70.

- Evaluation Plan Yes.
- Methods Used in Workers are recruited by those already involved in the program and by private interviews and group informational meetings.
- Methods Used in Investment in extensive up-front training, ongoing supervision and inservice education, and group interaction and support.
- Methods for Recruiting Professional referrals and inserts in public utilities billing to the entire community.
- Methods for Retaining Consistent services, good relationships, and effecting change in one's own life.

Program • Homemaker Aide Program.

Contact • Mallow, Chris.

Agency • Pendleton Community Care, P.O. Box 100, Franklin, WV 26807. (304) 358-7230. June

Program Dates • 1987-continuing.

Program Delivery • Homes.

Funding Source(s) • West Virginia Medicaid, and Title XIX Waiver.

Primary Purpose • To provide in-home services for homebound elderly persons over 65 years old to enable them to have independence.

Services Offered • Personal services, cooking, cleaning, minor therapy, medication monitoring, and social support.

Health Topic(s) Addressed • Alzheimer's disease, arthritis, cholesterol screening/education, and injuries.

Geographic Area/Unit • Rural.

Program Setting • Hospital or medical clinic.

Target Population • All white elderly persons over the age of 65.

CHA Title • Homemaker aides.

CHA Roles • Outreach, health promotion or health education, risk assessment, patient/client advocate, social support or counseling, and transportation provider.

• Each peer health worker receives 32 hours of initial training, 12 hours of continuing training every month, \$5 per hour, health insurance, and retirement benefits. Peer health workers are trained by nurses, dietitians, and emergency medical technicians. The peer health workers work an average of 120 hours per month. Certificates are awarded to the workers.

Number of CHAs • 32.

Number of Clients Served • 40. in 12 Months

Quality of Life

Methods Used in • Referrals by other homemaker aides and advertisements.

Recruiting CHAs

Methods Used in • Provision of benefits and training.
Retaining CHAs

Methods for Recruiting • Clients are recruited by separate case management agencies.

Clients

Program • Living at Home/Block Nurse Program.

Contact • Seuntjens, Alice.

Agency • Living at Home/Block Nurse Program, Inc., IVY League Place, Suite 322, 475 Cleveland Avenue, N., St. Paul, MN 55104. (612) 649-0315.

Program Dates • 1982-continuing.

Program Delivery • Religious organizations, homes, public health clinics, and other community locations.

Funding Source(s) • Bush Foundation and the Blandin Foundation.

Primary Purpose • To provide technical assistance activities to local communities, and facilitate change in the way health and long-term care are financed.

Services Offered • The program provides information, social and support services, nursing and other professional services to elderly who might otherwise be admitted to nursing homes.

Methods Employed
 The program uses volunteers as part of the care management team. It taps the informal resources of family, neighbors, church and service groups and integrates them with formal nursing care services. The program also coordinates with existing agencies for services other than nursing, personal care, and homemaker.

Materials Used • Living at Home, block nurse manual; Living at Home, block nurse video; Bridging the Gap, from the Minnesota Department of Human Services; Strengthening Your Team; Peer Counseling Handbook and trainers manual; and Forming a Community-based Volunteer Network.

Health Topic(s) Addressed • Alzheimer's disease, arthritis, high blood pressure, good nutrition, physical activity, and urinary incontinence.

Geographic Area/Unit • Rural and urban family units and communities.

Program Setting • Community-based agency, schools, public health/home care nursing agency.

Target Population • African Americans, whites, Mexican Americans, and Native Americans of the Sioux and Chippewa tribes. Adults 65 and over are targeted.

CHA Title • Volunteer visitors.

CHA Roles • Outreach, client advocacy, client services, social support, transportation, and community advocacy.

CHA Information • Volunteer visitors average 4 hours worked per month. They are not compensated. They receive 8 to 10 hours of initial training and 1 hour per month of inservice training.

Number of CHAs • 60.

Number of Clients Served • 800. in 12 Months

Evaluation Plan • Evaluation measures include statistics on the number of clients served.

Methods Used in • Word of mouth, church groups, and senior groups.

Recruiting CHAs

Methods Used in • Satisfaction in making a contribution, feedback from individuals served, and recognition from the program.

Methods for Recruiting • Word of mouth, family members, and pastors and other church members.

Clients

Methods for Retaining • Having their needs addressed, by establishing trust and friendship within the Clients program, and by the availability of services.

Program • Peer Counseling.

Contact • Slevin, Amy.

Agency • Marian Health Center, Box 3168, Sioux City, IA 51102. (712) 279-5610.

Program Dates • July 1991-continuing.

Program Delivery • Homes.

Funding Source(s) • Area Agency on Aging.

Primary Purpose • To promote the dignity, respect, self-sufficiency, and socialization of the elderly to prevent unnecessary and inappropriate institutionalization.

Services Offered • Social interaction, support, reinforcement of skills, assessment, and referral.

Methods Employed • Training of peer counselors to perform these services.

Materials Used • Developed curriculum and training guide, videos, and brochures.

Health Topic(s) Addressed • Depression.

Geographic Area/Unit • County.

Program Setting • Hospital or medical clinic.

Target Population • African-American and white elderly men and women.

CHA Title • Peer counselors.

CHA Roles • Client advocacy and social support services.

CHA Information • Peer counselors work 2 hours per month. They are not paid. They receive 25 hours of initial training and 1 hour per month of inservice training. The program does not issue credits or certificates.

Number of CHAs • 20.

Number of Clients Served • 50. in 12 Months

Quality of Life

Methods Used in • Newspaper advertisements, word of mouth, and retirees in the community.

Recruiting CHAs

Methods Used in • Monthly support groups, clients who have needs, and availability.

Retaining CHAs

Methods for Recruiting • Discharge planning conferences and agency contacts.

Clients

Methods for Retaining • Consistent peer visits.

Clients

Program • Respite.

Contact • Janik, Patricia L.

Agency • National Council of Catholic Women, 1275 K Street, NW., Suite 975, Washington, DC 20005. (202) 682-0334.

Program Dates • 1986-continuing.

Program Delivery • Homes.

Funding Source(s) • Local level agencies.

Primary Purpose • To provide support for families of the frail elderly throughout the United states.

Services Offered • Home visits and providing assistance to the elderly to relieve the caretakers.

Wethods Employed
 Using volunteers who have been trained by health professionals in the skills needed to provide companionship and care to an elderly person in the home. Volunteers offer the family of the elderly person respite from their constant caregiving.

Materials Used • A training manual published by the National Council of Catholic Women.

Health Topic(s) Addressed • Alzheimer's disease, arthritis, diabetes, heart disease, high blood pressure, injuries, good nutrition, osteoporosis, stroke, urinary incontinence, and safety.

Geographic Area/Unit • Rural and urban family units and communities.

Program Setting • Councils of Catholic Women throughout the United States.

Target Population • All elderly persons.

CHA Title • Respite volunteers.

CHA Roles • Outreach, client advocacy, and client services.

• The average number of hours worked per month varies. Peer workers receive no compensation for their services. They usually receive a full day or several evenings of training. They do not receive inservice training. The program does not issue credits or certificates.

Number of CHAs • 3,000 peer workers in the program throughout the United States.

Recruiting CHAs

Methods Used in • Recruiting of peer workers is done at the local level.

Clients

Methods for Recruiting • Distribution of brochures and public service announcements.

Program • RespiteCare.

Contact • Friedman, Ruth.

Agency • RespiteCare, 2008 Dempster Street, Evanston, IL 60202. (312) 539-7990.

Program Dates • July 1988-continuing.

Program Delivery • Schools, religious organizations, homes, day care centers, nursing facilities, and other community locations.

Funding Source(s) • RespiteCare.

Primary Purpose • To provide respite services and care, in Evanston, Illinois, to family caregivers of frail older adults and medically fragile infants and toddlers to age 3.

Services Offered • Services offered include 4 hour blocks of respite; out of home respite, in institutional settings for older adults, and in school and daycare settings for children; telephone support groups; caregiver stress hotline; and curriculum development and training for community volunteers and organizations.

Methods Employed • Placing community volunteers in homes of family caregivers. The volunteers give families a break and serve as a point of entry into the health care and social service system.

Materials Used • Developed curricula, training guides, and teaching aids. Some materials are in Korean and Spanish.

Health Topic(s) Addressed • Alzheimer's disease, nutrition, aging, respite family caregiving issues, and special care needs in pediatric home settings.

Geographic Area/Unit • Urban communities at the national level.

Program Setting • Community-based agency.

Target Population • African-American, white, Mexican-American, and Korean adults, infants, and children.

CHA Title • Senior volunteers, pediatric volunteers, or respite specialists.

CHA Roles • Client advocacy, client services, and social support.

CHA Information •

Peer workers average 50 hours worked per month. They receive varying rates of compensation. Peer workers receive 12 to 16 hours of initial training and 3 hours of inservice training per month. The program does not issue credits or certificates.

Number of CHAs • 250.

Number of Clients Served • in 12 Months

• 400.

Evaluation Plan • Yes.

Methods Used in • Recruiting CHAs

Word of mouth, community presentations, and press releases.

Methods Used in • Retaining CHAs

Frequent contact and supervision, recognition events, and inclusion on a mailing list to receive newsletters and other program information.

Methods for Recruiting • Clients

Formal and informal presentations to community health and social service providers and practitioners; referrals from community agencies, institutions, and practitioners; and printed materials such as brochures and flyers.

Methods for Retaining • Clients

Consistent provision of high quality service, qualitative case management, and supportive services complementing direct respite service.

Sexual Behavior

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Program • Casa en Casa.

Contact • Lind, Terrie.

Agency • Planned Parenthood Santa Clara and San Benito Counties, 1691 The Alameda, San Jose, CA 95124. (408) 287-7532.

Program Dates • October 1992-continuing.

Program Delivery • Homes.

Funding Source(s) • Department of Health Services, Office of AIDS.

Primary Purpose • To conduct educational sessions for family, friends, and neighbors in a community member's home about issues that affect families, parents, and women. The sessions are presented in Spanish or bilingually, and the program is free.

Services Offered • An experienced educator who is also a parent provides current information and effective skills to the participants in the group. Participants have the opportunity to receive further training to provide similar home-based education in their own community.

Materials Used • A developed curriculum.

Health Topic(s) Addressed • Family planning, interpersonal communication, HIV/AIDS, adult and adolescent sexual behavior, and substance abuse.

Geographic Area/Unit • Rural, urban, multi-county, and family units.

Program Setting • Community-based agency and reproductive health clinic.

Target Population • Mexican-American adolescents and adults.

CHA Title • Promotoras.

CHA Roles • Outreach, health promotion or health education, social support or counseling, transportation provider, and community advocate.

• Each peer worker receives 10 hours of initial training and undergoes a mentor period. In addition, the peer workers receive training twice a year or as needed and a stipend for each visit. Their training is conducted by health educators.

Sexual Behavior

Number of CHAs • 15.

Methods Used in • Personal/professional networks.

Recruiting CHAs

Program • HRS D-3 AIDS Program.

Contact • Koehler-Sides, Gay.

Agency • Florida Department of Health and Rehabilitative Services, 1000 Northeast 16th Avenue, Box 19, Gainesville, FL 32601. (904) 336-7197.

Program Dates • July 1989-continuing.

Program Delivery • Public health clinics and other community locations.

Funding Source(s) • Florida Department of Health and Rehabilitative Services.

Primary Purpose • To slow the spread of HIV/AIDS.

Services Offered • Education, distribution of condoms, counseling, testing, and referrals.

Methods Employed • Street outreach.

Materials Used • You and AIDS, Be Safe, and You Don't Have to be White or Gay to get AIDS.

Health Topic(s) Addressed • HIV/AIDS.

Geographic Area/Unit • County.

Program Setting • Local health department.

Target Population • African-American and white men and women from adolescence through adulthood.

CHA Title • AIDS outreach workers.

CHA Roles • Outreach, health education, and social support services.

• Peer workers work an average of 50 hours per month. They are compensated at the rate of \$7.00 per hour. They receive 20 hours of initial training followed by 2 hours per month of inservice training.

Number of CHAs • 2.

Number of Clients Served • 3,000. in 12 Months

Sexual Behavior

Methods Used in ● Word of mouth and advertising. Recruiting CHAs

Methods Used in • Careful screening during the hiring process.

Retaining CHAs

Program • Ogitchidag Gikinooamaagad Players.

Contact • Briggs, Tom; Day, Sharon.

Agency • Minnesota American Indian AIDS Task Force, 1433 East Franklin Avenue, Minneapolis, MN 55369. (612) 870-1723.

Program Dates • 1989-continuing.

Program Delivery • Schools, public health clinics, Native American reservations, and other community locations.

Funding Source(s) • Minnesota Department of Health.

Primary Purpose • To reduce the risk of HIV/AIDS in Native American communities.

Services Offered • HIV/AIDS training and plays that deal with health issues that Native Americans face.

Methods Employed • Plays and peer educator inservice.

Materials Used • A play developed by the program.

Health Topic(s) Addressed • Family planning, HIV/AIDS, pregnancy and prenatal care, sexual behavior, smoking prevention, substance abuse, and violence.

Geographic Area/Unit • Rural and urban multi-state communities.

Program Setting • Community-based agency, state health department, and non-profit Native American agency.

Target Population • Native Americans from childhood through adulthood.

CHA Title • Peer educators.

CHA Roles • Outreach, health education, risk assessment, client advocacy, and community advocacy.

• Peer educators work an average of 20 hours per month. They receive a salary of \$4.25 per hour and players receive \$25 for each show. Training is ongoing; workers receive approximately 20 hours per month.

Number of CHAs • 20.

Sexual Behavior

Number of Clients Served • 10,000. in 12 Months

Evaluation Plan • An evaluation plan is not yet available.

Methods Used in • Flyers and posters in schools, and word of mouth.

Recruiting CHAs

Methods Used in • Pride, pay, and fun. Retaining CHAs

Program • Peer Education Program.

Contact • Herwehe, Jane.

Agency • Children's Hospital, 914 Richard Street, New Orleans, LA 70130. (504) 524-4611.

Program Dates • February 1992-continuing.

Program Delivery • Community, hospitals/medical clinics.

Funding Source(s) • Health Resources and Services Administration, and the NO/AIDS Task Force.

Primary Purpose • To provide support to individuals who have tested positive for the human immunodeficiency virus (HIV), the opportunity for HIV positive individuals assist each other.

Services Offered • Peer education consultations in clinic settings and peer education office hours.

Methods Employed • A log of consultations, surveys, focus groups with clients, and documentation of set and achieved goals.

Materials Used • A developed training guide, which will be available August 1994.

Health Topic(s) Addressed • HIV/AIDS, nutrition, sexual behavior (adolescent), and substance abuse.

Geographic Area/Unit • Urban and family units.

Program Setting • Community-based agency.

Target Population • Male and female Mexican Americans, Central Americans, African Americans, and whites of all ages.

CHA Title • Peer educators.

CHA Roles • Health promotion or health education, risk assessment, patient/client advocate, and social support or counseling.

CHA Information • Each peer educator receives 44 hours of initial training by health educators, social workers, and the program coordinator. They are paid \$5.00 per hour.

Number of CHAs • 7.

Sexual Behavior

Number of Clients Served • 70. in 12 Months

Evaluation Plan • An evaluation plan is in process.

Methods Used in • Referrals from case management and health education staff. Recruiting CHAs

Methods Used in Retaining CHAs Providing financial compensation, incorporation of peer educators in program planning and evaluation, and providing opportunities for national networking and professional development.

Methods for Recruiting • Collaborative agreements with the community HIV antibody counseling and testing centers for referral of and outreach to identified HIV-positive clients.

Methods for Retaining • Empowerment of clients to care for themselves and others.

Clients

Program • Peers Organized and Determined to Eradicate Risks (PODER).

Contact • Samaniego-Krows, Lupe M.

Agency • Logan Heights Family Health Center, 1809 National Avenue, San Diego, CA 92113. (619) 234-8171.

Program Dates • November 1991-continuing.

Program Delivery • Schools, homes, worksites, and the community.

Funding Source(s) • Centers for Disease Control and Prevention.

Primary Purpose • To provide comprehensive, ongoing, culturally sensitive health care and education for teenagers.

Services Offered • Education on various health topics.

Methods Employed • Presentations and one-on-one counseling.

Materials Used • An adapted curriculum in English and Spanish.

Health Topic(s) Addressed • Family planning, HIV/AIDS, adolescent sexual behavior, and substance abuse.

Geographic Area/Unit • Urban family units and communities at the county level.

Program Setting • Community health center.

Target Population • Mexican-American adolescents.

CHA Title • Peer health educators.

CHA Roles • They provide outreach, health education, and risk assessment.

• Peer health educators work an average of 40 hours per month. They receive a salary of \$5.49 per hour and some incentives such as tee shirts and dinners.

Peer workers receive 20 hours of initial training and 8 hours of inservice training per month.

Number of CHAs • 10.

Number of Clients Served • 1,500. in 12 Months

Sexual Behavior

- Evaluation Plan Yes.
- Methods Used in Through connections with local schools. Recruiting CHAs
- Methods Used in Keeping them busy and motivated and by hourly payment.

 Retaining CHAs
- Methods for Recruiting Peer outreach, presentations at schools, and word of mouth.

 Clients
- Methods for Retaining Coordination efforts with parents and with schools.

 Clients

Program • Promotoras Comunitarias Training Program.

Contact • Cordero, Melinda.

Agency • Planned Parenthood Los Angeles, 1920 Marengo Street, Los Angeles, CA 90033. (213) 223-4462.

Program Dates • July 1991-continuing.

Program Delivery • Homes, schools, worksites, religious organizations, and other community locations.

Funding Source(s) • Planned Parenthood Los Angeles.

Primary Purpose • To empower Latinas in the Los Angeles area with knowledge about family planning and reproductive health, and help them to develop communication and leadership skills to enable them to teach other women in their neighborhoods.

Services Offered • Training sessions and monthly support groups.

Methods Employed • Weekly meetings with a health educator to learn about various health topics.

Materials Used • Several curricula that are purchased and adapted for the program, and many educational videotapes.

Health Topic(s) Addressed • Breast, cervical, and uterine cancer; family planning; HIV/AIDS; pregnancy and prenatal care; sexual behavior; substance abuse; violence; self esteem; and family communication.

Geographic Area/Unit • Urban, county, family units, and communities.

Program Setting • Family planning.

Target Population • Hispanic Americans and Mexican natives from adolescence through adulthood.

CHA Title • Promotoras comunitarias.

CHA Roles • Outreach, health education, client advocacy, and community advocacy.

Sexual Behavior

CHA Information •

Promotoras work between 5 and 40 hours per month. They receive \$25 per presentation. They also receive gifts on holidays after they have performed a certain amount of presentations. Peer workers receive 18 hours of initial training and 5 hours of inservice training per month. The program issues certificates of completion.

Number of CHAs • 83.

Number of Clients Served • 800. in 12 Months

Methods Used in • Word of mouth, agency contacts, and program presentations. Recruiting CHAs

Methods Used in • Program's investment in them, attention paid to them, and incentives.

Retaining CHAs

Program • Promotores Voluntarios.

Contact • Robinson, Toni.

Agency • Planned Parenthood of Central and Northern Arizona, 5651 North 7th Street, Phoenix, AZ 85014. (602) 272-6691.

Program Dates • 1987-continuing.

Program Delivery • Homes, community centers, other community locations.

Funding Source(s) • Planned Parenthood.

Primary Purpose • To provide volunteer members of Arizona's Hispanic community with the skills necessary to educate others on family life, human sexuality, and reproductive health issues without changing their cultural values or posing a threat to their sense of family.

Services Offered • Training.

Methods Employed • Training times and locations that are convenient to each group and are provided free of charge.

Materials Used • A developed curriculum in Spanish and English, a training manual currently being developed in Spanish and English, and many videos, brochures, and various teaching aids.

Health Topic(s) Addressed • Breast and cervical cancer, family planning, HIV/AIDS, pregnancy and prenatal care, sexual behavior, family life education, and sexuality education.

Geographic Area/Unit • Rural and urban county communities.

Program Setting • Voluntary, private, non-profit family planning agency.

Target Population • Hispanic American adults.

CHA Title • Promotores voluntarios.

CHA Roles • Outreach, health promotion, social support, transportation, and community advocacy.

Sexual Behavior

CHA Information •

Peer workers average 10 hours worked per month. They do not receive a salary, but receive incentives such as gift certificates, gifts, and recognition. They receive 18 hours of initial training and 2 hours of inservice training per month. The program issues certificates of completion.

Number of CHAs • 50.

Methods Used in • Recruiting CHAs

Community organizations, referrals from current promotoras, and advertising.

Methods Used in • Retaining CHAs

• Followup meetings, incentives, and limiting their length of service to 1 year.

Methods for Recruiting • Clients

Community organizations, referrals from current promotoras, and advertising.

Methods for Retaining • Clients

• Followup by promotoras and followup by clinics.

Program • Proud to Be Free Peer Team.

Contact • Howell, Melanie.

Agency • Pregnancy Care Center, 1608 Sundale Avenue, Cincinnati, OH 45239. (513) 521-3117.

Program Dates • July 1990-continuing.

Program Delivery • Homes, schools, religious organizations, and other community locations.

Funding Source(s) • Urban League of Greater Cincinnati, and the Ohio Department of Education.

Primary Purpose • The purpose of Cincinnati's Proud to Be Free Peer Team program is teens helping teens to understand their sexuality and the responsibility it brings.

Services Offered • Educational presentations and videos.

Methods Employed • Using peer teams of teens to communicate with other teens.

Materials Used • Developed curricula, videos, brochures, training guides, and drama skits.

Health Topic(s) Addressed • Family planning, HIV/AIDS, and adolescent sexual behavior.

Geographic Area/Unit • Rural, county, state, multi-county, multi-state, family units, and communities.

Program Setting • Community-based agency.

Target Population • African-American and white adolescents and adults.

CHA Title • Peer counselors.

CHA Roles • Outreach, health education, social support, and community advocacy.

• Peer counselors work an average of 10 hours per month. They do not receive a salary, but are included in social events as an incentive to remain peer counselors. They receive 30 hours of initial training and 4 hours of inservice training per month. The program does not issue credits or certificates.

Number of CHAs • 10.

Number of Clients Served • 2,500. in 12 Months

Sexual Behavior

Evaluation Plan • Yes. Peer team presentations are evaluated by the audience.

Methods Used in • Recruiting CHAs

• Invitations from their friends, requests for workers at peer presentations, and adult referrals.

Methods Used in • Retaining CHAs

• Continual positive feedback from their audiences, a close mentoring relationship with their director, and an esprit de corps within the team.

Methods for Recruiting • Clients

• School invitation, churches, and community organizations.

Methods for Retaining • Clients

• Adult and peer support and followup.

Program • Corner Theatre Troupe.

Contact • Eley, Eleanor.

Agency • 47 North Huron, Ypsilanti, MI 48197. (313) 484-3700.

Program Dates • 1981-continuing.

Program Delivery • Schools, group homes, community, and migrant centers or camps.

Funding Source(s) • United Way, the Corner Health Center, and various other sources.

Primary Purpose • To prevent problems associated with substance abuse, premature sexual intercourse, and violence, through peer education and drama.

Services Offered • Train peer educators and theatre troupe members to present an interactive program to audiences.

Materials Used • Teaching Safer Sex curriculum; Changing Bodies, Changing Lives; Teen AIDS in Focus; Straight Talk series (Rodale); and other materials.

Health Topic(s) Addressed • Adolescent sexual behavior, HIV/AIDS, smoking prevention, substance abuse, family planning, pregnancy/prenatal care, and violence.

Geographic Area/Unit • County, multi-county, and communities.

Program Setting • Community-based agency, medical clinic, and private non-profit organization.

Target Population • African-American, Mexican-American, white, and other male and female adolescents and adults.

CHA Title • Theatre Troupe members.

CHA Roles • Outreach and health promotion/health education.

CHA Information • Peer workers work an average of 10 hours per month. Compensation is at \$50 per term, with 15 per performance. Initial training is 75 hours, with inservice training of 75 hours per month. The program issues credits and certificates, and is taught by health educators.

Number of CHAs • 25 to 30.

Sexual Behavior

Number of Clients Served • 2,000. in 12 Months

Methods Used in • Recruiting CHAs

• Recruitment performances, friends of current troupe members, and publicity in schools.

Methods Used in • Retaining CHAs

• Fun activities at trainings, meaningful relationships among peer educator staff, and stipend.

Methods for Recruiting • Clients

• Troupe is well known, many invitations to perform, publicity in newspaper and radio, performances at conference for professionals.

Methods for Retaining • Clients

• Very interactive program that addresses specific interests of each audience.

Substance Abuse

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Program • Substance Abuse Community Information Services.

Contact • Hall, Sharon P.

Agency • Anne Arundel County Department of Health, 33 Parole Plaza, Suite 203, Annapolis, MD 21401. (410) 222-7900.

Program Dates • June 1991-continuing.

Program Delivery • Schools, worksites, religious organizations, community, public health clinics, and substance abuse treatment agencies.

Funding Source(s) • Anne Arundel County Department of Health.

Primary Purpose • To target service toward individuals with alcohol and substance abuse programs.

Services Offered • Education, assessment, intervention, referral and limited treatment services, comprehensive substance abuse evaluations, and referrals to private providers for treatment.

Methods Employed • Face-to-face interviews, use of approved screening instruments, HIV/AIDS risk-reduction education, self-esteem building education, on-site counseling, and home visits.

Health Topic(s) Addressed • HIV/AIDS, pregnancy/prenatal care, and substance abuse.

Geographic Area/Unit • Anne Arundel County.

Program Setting • Local health department, state health department.

Target Population • All county citizens residing in Anne Arundel Country from adolescents to adults.

CHA Title • HIV street outreach worker.

CHA Roles • Outreach, health promotion or health education, and patient/client treatment or services.

CHA Information • Each HIV street outreach worker receives 40 hours of initial training, 4 hours of inservice training per month, and \$7 per hour. The persons who help train peer health workers are health educators and the program coordinator.

Substance Abuse

Number of CHAs • 1.

Number of Clients Served • 500. in 12 Months

Program • Taking Control.

Contact • Funk, Jean.

Agency • Minnesota Prevention Resource Center, 417 University Avenue, St. Paul, MN 55103. (612) 224-5121.

Program Dates • 1990-continuing.

Program Delivery • Schools.

Funding Source(s) • Minnesota Department of Human Services.

Primary Purpose • To address the issues of drinking and driving or riding, to examine the risks involved in drinking and driving or riding, to identify controls to minimize the risks of drinking and driving or riding, and to discuss responsible decision making.

Services Offered • A training program for facilitators.

Methods Employed • Methods used include 3 presentation sessions of 1 hour each.

Materials Used • A developed training guide, Taking Control, and developed videos.

Health Topic(s) Addressed • Substance abuse.

Geographic Area/Unit • Rural and urban areas within the state.

Program Setting • Schools.

Target Population • African-American, white, Mexican-American, Pacific-Islander, and Native-American adolescents.

CHA Roles • Health promotion and health education.

CHA Information • Peer workers deliver the program in 3 sessions of 1 hour each. Peer workers are not compensated. They receive 6 hours of initial training, and do not receive inservice training. The program does not issue credits or certificates.

Number of CHAs • 120.

Number of Clients Served • 6,000. in 12 Months

Substance Abuse

Methods Used in • Recruiting CHAs

• Schools do their own recruitment of peer workers.

Methods Used in • Retaining CHAs

Since the program consists of 3 1-hour sessions, the peer workers are not retained for long.

Tobacco Control

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Program • Doctors Ought to Care (DOC), University of Minnesota Chapter.

Contact • Johnson, Debbie.

Agency • University of Minnesota, Department of Family Practice and Community Health, 702 Washington Avenue, SE., Minneapolis, MN 55414. (612) 627-1096.

Program Dates • January 1989-continuing.

Program Delivery • Schools.

Funding Source(s) • University of Minnesota, Department of Family Practice and Community Health, and the University of Minnesota, School of Medicine.

Primary Purpose • To help young people make responsible choices concerning their health by giving them accurate information about health care concerns.

Services Offered • The program provides outreach services.

Methods Employed • Pairs of DOC volunteers, who are students from the University of Minnesota Medical School, are available to give presentations to sixth through twelfth grade students.

Materials Used • A curriculum and training materials.

Health Topic(s) Addressed • Family planning, HIV/AIDS, nutrition, pregnancy and prenatal care, physical activity, sexual behavior, smoking prevention, substance abuse, and steroids.

Geographic Area/Unit • Rural and urban schools in a seven county metro area.

Program Setting • Schools.

Target Population • Adolescents of all races and ethnic backgrounds.

CHA Title • The program's peer workers are medical students.

CHA Roles • Outreach and health education services.

• The medical students work an average of 2 hours per month. They do not receive compensation. The medical students receive a minimum of 6 hours of initial training from University of Minnesota medical education staff and a program coordinator.

Tobacco Control

Number of CHAs • 117.

Number of Clients Served • 1,090. in 12 Months

Evaluation Plan • Yes.

Methods Used in • The student handbook, an orientation fair, and an information session during Recruiting CHAs the noon hour regarding DOC.

Methods Used in • Rotating the students so the same ones are not always going out, keeping school requests flexible, and being compassionate toward the medical students.

Methods for Recruiting • Letters to schools, a good reputation, and participation in conferences.

Clients

Methods for Retaining • Understanding, followup, and quality of the program.

Clients

Program • Promotoras de la Salud.

Contact • Hennessey, Susana; Koren, Nora G.

Agency • San Francisco Department of Public Health, Tobacco Free Project, 1540 Market Street, No. 250, San Francisco, CA 94102. (415) 554-9153. (415) 255-3660.

Program Dates • January 1993-continuing.

Program Delivery • Hospitals/medical clinics.

Funding Source(s) • California Department of Health Services, Tobacco Control Section.

Primary Purpose • To reduce access to tobacco products and reduce demand for tobacco in San Francisco's Spanish speaking community.

Services Offered • Promoter training, support, outreach, slide shows, public campaigns, and pantomimed educational presentations.

Methods Employed • Methods employed are related to services offered.

Health Topic(s) Addressed • Tobacco.

Geographic Area/Unit • Urban.

Program Setting • Local health department.

Target Population • Hispanic-American children, adolescents, and adults.

CHA Title • Promotoras de la Salud.

CHA Roles • Outreach, health promotion and education, and community advocacy.

• Peer workers work an average of 10 to 15 hours per month. They receive a stipend of \$300. Peer workers receive 40 hours of initial training and 12 hours of inservice training per month. The program issues certificates.

Number of CHAs • 27.

Number of Clients Served • 3,500. in 12 Months

Evaluation Plan • Yes.

Tobacco Control

Methods Used in • Recruiting CHAs

• Word of mouth, flyers, and a mailing list targeted to Latino providers.

Methods Used in • Retaining CHAs

• Respect and validation within the training program, ongoing contact and support, and stipends.

Methods for Recruiting • Clients

• Clients are approached and served within the community, at schools, fairs, and centers.

Program • Tobacco, Alcohol and Drug Use Prevention (TAD).

Contact • Borchert, Carol.

Agency • Quin County Community Health Services, Box 248, Newfolden, MN 56738. (218) 874-7845.

Program Dates • April 1989-continuing.

Program Delivery • Schools and in other community locations.

Funding Source(s) • Quin County Community Health Services.

Primary Purpose • To encourage students to take responsibility for their actions and attitudes toward tobacco, alcohol, and drugs.

Methods Employed • Peer leaders are trained in a 2 day camp setting. Peer leaders return to classes and present 8 to 10 hours of prevention education to other students.

Materials Used • A developed TAD manual, developed and purchased videos, a newsletter, and a bulletin board.

Health Topic(s) Addressed • Tobacco, alcohol, and drugs.

Geographic Area/Unit • Rural county areas.

Program Setting • Local health department.

Target Population • Youth 6 to 12 years of age.

CHA Title • Peer educators or leaders.

CHA Roles • Health promotion and health education.

CHA Information • Peer workers average 2 hours worked per month. They receive no compensation. Peer workers receive 10 hours of initial training. A newsletter provides additional training information. The program issues certificates.

Number of CHAs • 38.

Number of Clients Served • 400. in 12 Months

Tobacco Control

- Evaluation Plan Yes. The program is evaluated by conducting surveys of students, teachers, and parents. Part of the evaluation process is setting up a tracking program to chart student attitudes regarding tobacco, alcohol, and drug use prevention.
- Methods Used in Two peer leaders are chosen from each class; they have responsibilities during Recruiting CHAs 1 school year only.
- Methods for Recruiting Program success and teacher satisfaction serve as recruitment methods for clients.
- Methods for Retaining Client retention is for 1 school year only.

 Clients

Training Programs

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Program • Community Health Worker Training Program.

Contact • Gardner, Kristen.

• San Francisco State University, Health Education Department, Community Health Worker Training Program, 1600 Holloway Avenue, San Francisco, CA 94132. (415) 338-3034.

Program Dates • August 1993-continuing.

Program Delivery • Schools.

Funding Source(s) • Urban Institute, Department of Education.

Primary Purpose • To improve the primary health care provided to underserved communities by increasing the number of CHW's equipped to provide culturally and linguistically sensitive services.

Services Offered • The program is a 1-year training program that employs lectures, field work, and consultation.

Methods Employed • Classes are facilitated by an interdisciplinary team including experienced CHW's. As part of the class work, each student creates a portfolio to showcase his or her abilities and accomplishments.

Materials Used • Materials used are varied. The program is developing its own manuals.

Health Topic(s) Addressed • Family planning, HIV/AIDS, pregnancy and prenatal care, sexual behavior, substance abuse, senior health, mental health, and child health.

Geographic Area/Unit • County, urban, and multi-county.

Program Setting • Schools.

Target Population • All populations.

CHA Title • Community health workers.

CHA Roles • Outreach, health education, risk assessment, patient advocacy, client services, social support, transportation, and community advocacy.

Training Programs

CHA Information • The program provides a salary of \$15.00 per hour to its mentors. The training program issues credits and certificates.

Number of CHAs • 3 mentors and 25 students.

Number of Clients Served • 30. in 12 Months

Evaluation Plan • Yes.

Methods Used in • Advertisements in agencies. Recruiting CHAs

Methods Used in • Interesting and supportive class work.

Retaining CHAs

Program • Community Partnerships Initiative in Health Professions Education.

Contact • Moya, Eva M.

Agency • Institute for Border Community Health Education, 4824 Alberta, Suite 209, El Paso, TX 79905. (915) 545-6900.

Program Dates • 1991-continuing.

Program Delivery • Schools, school-based facilities, homes, public health clinics, worksites, the community, and religious organizations.

Funding Source(s) • W.K. Kellogg Foundation.

Primary Purpose • To inform the Lower Valley residents about health/health care delivery, the use and management of health care resources, and the responsibility of individuals and families for their own health and well being.

Services Offered • The program will create academic, primary health centers with outreach to schools, community health centers, and county-state health department services in the schools.

Methods Employed • The peer educators work in the community teaching the public about a variety of health topics.

Materials Used • Bilingual or in Spanish and include a curriculum for volunteer community health education, videos from voluntary health organizations, and guides.

Health Topic(s) Addressed
 Adult and adolescent sexual behavior, cancer, cholesterol screening and education, diabetes, emotional health, family planning, heart disease, HIV/AIDS and sexually transmitted diseases, injuries, nutrition, pregnancy and prenatal care, physical activity, smoking prevention, stroke, substance/alcohol abuse, urinary incontinence, and violence.

Geographic Area/Unit • Rural, urban and semi-urban, family units, and communities.

Program Setting • Institute for Border Health Education.

Target Population • Male and female Mexican Americans, Hispanic Americans, African Americans, and whites; children, adolescents, and adults.

CHA Title • Community health promoters or community health workers.

Training Programs

CHA Roles •

Outreach, health promotion and health education, risk assessment, patient and client advocate, patient/client treatment or services, social support, transportation provider, community advocate, case followup, and multidisiplinary education.

CHA Information •

Community health workers are paid \$5.10 per hour. Both volunteer and full-time community health workers undergo 120 hours of continuing education training from a multidisiplinary team of health educators, physicians, social workers, and nurses. Workers earn certificates and continuing education credits.

Number of CHAs • 4 paid and 55 volunteer.

Number of Clients Served • in 12 Months

5,500.

Evaluation Plan •

The evaluation plan is in process.

Methods Used in • Recruiting CHAs

Home visitation; community meetings; word of mouth; and recruitment by volunteers, community health workers, and the Center's staff.

Methods Used in • Retaining CHAs

 Continuing education opportunities and community specific tasks, agency and program visits and presentations, and emotional/mental health class discussions.

Methods for Recruiting • Clients

• Informal referral process, community activities, and agency and social service program referral.

Methods for Retaining • Clients

Peer education approach to health promotion, home and community visits, and continuing education sessions and incentives.

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1. What was your general impression of the layout?	Like	d?		Di	sliked?
Comment:	1	2	3	4	5
2. How easy does it seem to use?	Very 1	easy	3	Not at a	ill easy
Comment:	1	L	3	4	3
3. Do you think this book will Save staff time Assist in locating materials Give you new information Enlarge your contacts or networks Comment:			<u>Yes</u>	<u>:</u>]	No
4. What persons other than yourself might use this b	oook?				
5. Additional comments:					
Name: Position Title: Organization: Address:					

Please fold and tape so that the address on the back is showing.

Remember to mail with postage.

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CHID PROGRAM DATA SHEET: Peer Health Programs

The Health Promotion and Education subfile of the Combined Health Information Database (CHID) promotes networking and enhances sharing of health promotion information with other health professionals.

If you would like to share your peer health program information and resources PLEASE

- 1. Complete this form.
- 2. Use the mailing label provided to return the form and program materials as soon as possible. (These materials will be cataloged at CDC; they will not be distributed. Anyone requesting the materials will be referred to your contact person.)

 THANK YOU

IDENTIFYING INFORMATION				
1. Program Name:	4. Contact Person-Title/Position:			
2. Agency Name:	5. Telephone Number:			
	()			
	Fax Number:			
	<u>(</u>)			
3. Mailing Address:	6. Program Begin Date:			
	Program End Date (if known):			
	r rogram zna bate (ii known).			
PROGRAM	SETTING			
7. What type of organization delivers your program? (Che	ck ALL that apply.)			
Community-based agency Local he	ealth department Hospital or medical clinic			
State health department Religiou	s institution School or school system			
Other (Please specify)				
Private (Please specify)				

PROGRAM SETTING (Cont'd)

8. What are your program funding sources? (If more than 2, please list on back.)					
a. A	gency Name:				
	Federal Local gover	nment a	gency Private found	ation	Voluntary
11.00	State Non-profit		Other		
a. A	gency Name:				
	Federal Local gove	rnment a	gency Private found	lation	Voluntary
	State Non-profit		Other		
9. Which	ch of the following health topics a	re covere	d? (Check ALL that apply.)		
	Alzheimer's disease		High bllood pressure	, veri 2	Sexual behavior (adolescent)
	Arthritis		HIV/AIDS	1 . 10	Smoking prevention
	Cancer(Specify)		Injuries		Stroke
	Cholestrol screening/education		Nutrition		Substance abuse
11112	Diabetes		Osteoporosis		Urinary inontinence
	Family planning		Pregnancy/Prenatal care	2	Violence
	Heart disease		Physical activity		Other
10. Wh	10. Which of the following geographic and other units are served? (Check ALL that apply.)				
(- 1	Rural		National		Multi-state
	County	1-00-1-00 1-00-1-00	Urban		Family units
1	State		Multi-county		Communities
******	Other				
11. Where are programs delivered? (Check ALL that apply.)					
;	Schools		Homes		Public health clinics
2 1	Worksites		Community		Hospitals/Medical clinics
	Religious organizations		Migrant centers or camps		Other

12.	vvnich specific target population(s) are	e served? (Check ALL that apply.)
	ace/Ethnicity sian American	Hispanic American	
Ê	Chinese	Cuban	Black
	Japanese	Mexican American	White
	Filipino	Central American	Other (specify)
	Other(specify)	Puerto Rican	Infants
_		South American	Children (6-12)
L	Pacific Islanders	Male	Adolescents (13-19)
L	Alaskan Natives	Female	Adults (20-64)
L	Native Americans Tribe (specify)	Terriale	Addits (20-04)
13	What are the average number of hours	worked per month by each peer	worker?
	Does your program provide compensat		
	(Check ONE)	NO NO	
	if YES, are they	Salary (Hr. rate)\$	Stipend (Amt.)\$
Г			
45			
	How many initial training hours does ea	ach peer worker receive?	
16.	How many initial training hours does earlier how many inservice (continuing) training	ng hours per month does each pe	
16.	How many initial training hours does ea	ng hours per month does each pe	
16. 17.	How many initial training hours does earlier how many inservice (continuing) training	ng hours per month does each pe	er worker receive?
16. 17. 18.	How many initial training hours does earlier How many inservice (continuing) training Does your program issue credits? (Ch	ach peer worker receive? Ing hours per month does each per Ineck ONE) YES (Check ONE) YES	er worker receive? NO NO
16. 17. 18.	How many initial training hours does earned How many inservice (continuing) training Does your program issue credits? (Chapter Continuing) training Does your program issue certificates?	ach peer worker receive? Ing hours per month does each per Ineck ONE) YES (Check ONE) YES	er worker receive? NO NO
16. 17. 18.	How many initial training hours does earlier How many inservice (continuing) training Does your program issue credits? (Chapter Does your program issue certificates? Who helped train your peer workers (e.	ach peer worker receive? Ing hours per month does each per Ineck ONE) YES (Check ONE) YES g., nurses, health educators, programmer.	er worker receive? NO NO gram coordinator, others)
16. 17. 18. 19.	How many initial training hours does earlier How many inservice (continuing) training Does your program issue credits? (Chapter Does your program issue certificates? Who helped train your peer workers (e.	ach peer worker receive? Ing hours per month does each per meck ONE) (Check ONE) YES G., nurses, health educators, program INFORMATION CHA COPY OF YOUR PROGRAM	er worker receive? NO NO gram coordinator, others)
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16. 17. 18. 19. 20. 21.	How many initial training hours does earlier How many inservice (continuing) training Does your program issue credits? (Chapter Does your program issue certificates? Who helped train your peer workers (e PLEASE ATTAC How many peer health workers are in your peer workers are in your peer workers. (c)	ach peer worker receive? Ing hours per month does each per meck ONE) YES (Check ONE) YES Ing., nurses, health educators, program PROGRAM INFORMATION Our program? Deen served by your peer workers are members of the target popular	er worker receive? NO NO NO gram coordinator, others) M DESCRIPTION s in the past 12 months? ation? (Check closest ONE.)

	What are the 3 methods that work the best for you in recruiting peer workers?
	What are the 3 methods that work best for you in retaining peer workers?
<u>a.</u>	
<u>b.</u>	
<u>c.</u>	
27.	What are the 3 methods that work best for you in recruiting clients into the program?
<u>a.</u>	
<u>b.</u>	
<u>c.</u>	
28.	What are 3 methods that work best in retaining clients in the program?
<u>a.</u>	
<u>b.</u>	
<u>C.</u>	
29.	What roles do your peer workers play in your program? (check ALL that apply.)
	Outreach Patient/Client treatment or services
	Health promotion or health education Social support or counseling
	Risk assessment Transportation provider
	Patient/Client advocate Community advocate
	RELATIONSHIPS
	Have your peer workers established relationships with other groups in the community (social groups, agencies, inizations)?
	(Please check ONE) YES NO
lf Y	/ES, please describe on back or attach description.

PROGRAM RESOURCES

31. Please list the materials that are used in your peer health program efforts.

TYPE	TITLE AND PUBLISHER	LANGUAGE (if other than English)	ORIGIN:	AVAILABILITY OF YOUR MATERIAL:	
 Curriculum Video Brochure Training guide Teaching aid Resources directory Other - specify 			Purchased Adapted Developed	 Purchase Borrow Rent Photocopy Unavailable 	
				_	
		Pr.			
32. Is there anything about your program you would like us to know?					

33. Program Description (please complete the following if the requested information is NOT included in your attached program description)a. Primary purpose of the program (include objectives)
b. Services offered
c. Methods employed/intervention strategies

DID YOU REMEMBER TO ATTACH TO THIS FORM:

- 1, YOUR PROGRAM DESCRIPTION
- 2. YOUR EVALUATION PLAN AND/OR FORMS
- 3. YOUR PROGRAM MATERIALS (ONE COPY)

PLEASE RETURN THESE ITEMS TO:

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